

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$57,570,735	\$72,131,779	\$14,561,044	25%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$36,111,295	\$30,758,941	(\$5,352,354)	-15%
4	Current Assets Whose Use is Limited for Current Liabilities	\$7,240,812	\$7,931,590	\$690,778	10%
5	Due From Affiliates	\$3,901,924	\$647,255	(\$3,254,669)	-83%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$3,252,641	\$3,799,896	\$547,255	17%
8	Prepaid Expenses	\$905,576	\$1,271,686	\$366,110	40%
9	Other Current Assets	\$0	\$185,866	\$185,866	0%
	Total Current Assets	\$108,982,983	\$116,727,013	\$7,744,030	7%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$22,743,662	\$26,988,802	\$4,245,140	19%
2	Board Designated for Capital Acquisition	\$37,259,421	\$88,694,819	\$51,435,398	138%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$60,003,083	\$115,683,621	\$55,680,538	93%
5	Interest in Net Assets of Foundation	\$41,147,474	\$0	(\$41,147,474)	-100%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$3,827,148	\$3,537,228	(\$289,920)	-8%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$208,277,975	\$231,218,906	\$22,940,931	11%
2	Less: Accumulated Depreciation	\$114,398,504	\$132,727,325	\$18,328,821	16%
	Property, Plant and Equipment, Net	\$93,879,471	\$98,491,581	\$4,612,110	5%
3	Construction in Progress	\$4,251,661	\$630,806	(\$3,620,855)	-85%
	Total Net Fixed Assets	\$98,131,132	\$99,122,387	\$991,255	1%
	Total Assets	\$312,091,820	\$335,070,249	\$22,978,429	7%

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LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$10,508,835	\$10,129,146	(\$379,689)	-4%
2	Salaries, Wages and Payroll Taxes	\$8,205,022	\$6,206,054	(\$1,998,968)	-24%
3	Due To Third Party Payers	\$1,831,013	\$2,614,222	\$783,209	43%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,825,000	\$1,895,000	\$70,000	4%
6	Current Portion of Notes Payable	\$0	\$137,691	\$137,691	0%
7	Other Current Liabilities	\$7,188,517	\$8,966,442	\$1,777,925	25%
	Total Current Liabilities	\$29,558,387	\$29,948,555	\$390,168	1%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$63,931,536	\$61,987,072	(\$1,944,464)	-3%
2	Notes Payable (Net of Current Portion)	\$0	\$2,604,759	\$2,604,759	0%
	Total Long Term Debt	\$63,931,536	\$64,591,831	\$660,295	1%
3	Accrued Pension Liability	\$75,300,446	\$50,267,036	(\$25,033,410)	-33%
4	Other Long Term Liabilities	\$30,697,882	\$31,337,809	\$639,927	2%
	Total Long Term Liabilities	\$169,929,864	\$146,196,676	(\$23,733,188)	-14%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$102,294,307	\$147,348,055	\$45,053,748	44%
2	Temporarily Restricted Net Assets	\$3,447,432	\$4,101,543	\$654,111	19%
3	Permanently Restricted Net Assets	\$6,861,830	\$7,475,420	\$613,590	9%
	Total Net Assets	\$112,603,569	\$158,925,018	\$46,321,449	41%
	Total Liabilities and Net Assets	\$312,091,820	\$335,070,249	\$22,978,429	7%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$560,641,054	\$585,390,725	\$24,749,671	4%
2	Less: Allowances	\$294,073,379	\$308,845,388	\$14,772,009	5%
3	Less: Charity Care	\$6,915,404	\$6,496,622	(\$418,782)	-6%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$259,652,271	\$270,048,715	\$10,396,444	4%
5	Other Operating Revenue	\$3,773,294	\$4,283,716	\$510,422	14%
6	Net Assets Released from Restrictions	\$0	\$91,211	\$91,211	0%
	Total Operating Revenue	\$263,425,565	\$274,423,642	\$10,998,077	4%
B. Operating Expenses:					
1	Salaries and Wages	\$109,597,557	\$107,381,105	(\$2,216,452)	-2%
2	Fringe Benefits	\$27,425,902	\$27,181,443	(\$244,459)	-1%
3	Physicians Fees	\$2,586,476	\$1,797,921	(\$788,555)	-30%
4	Supplies and Drugs	\$40,539,790	\$41,645,421	\$1,105,631	3%
5	Depreciation and Amortization	\$16,939,369	\$17,480,126	\$540,757	3%
6	Bad Debts	\$16,898,318	\$14,409,876	(\$2,488,442)	-15%
7	Interest	\$3,091,298	\$3,185,038	\$93,740	3%
8	Malpractice	\$119,872	\$2,443,084	\$2,323,212	1938%
9	Other Operating Expenses	\$33,447,989	\$46,578,269	\$13,130,280	39%
	Total Operating Expenses	\$250,646,571	\$262,102,283	\$11,455,712	5%
	Income/(Loss) From Operations	\$12,778,994	\$12,321,359	(\$457,635)	-4%
C. Non-Operating Revenue:					
1	Income from Investments	(\$2,817,022)	\$1,643,710	\$4,460,732	-158%
2	Gifts, Contributions and Donations	\$0	\$328,840	\$328,840	0%
3	Other Non-Operating Gains/(Losses)	(\$4,101,843)	(\$116,761)	\$3,985,082	-97%
	Total Non-Operating Revenue	(\$6,918,865)	\$1,855,789	\$8,774,654	-127%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$5,860,129	\$14,177,148	\$8,317,019	142%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$5,616,230	\$4,574,637	(\$1,041,593)	-19%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$5,616,230	\$4,574,637	(\$1,041,593)	-19%
	Excess/(Deficiency) of Revenue Over Expenses	\$11,476,359	\$18,751,785	\$7,275,426	63%
	Principal Payments	\$1,755,000	\$1,838,414	\$83,414	5%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$103,774,390	\$104,808,985	\$1,034,595	1%
2	MEDICARE MANAGED CARE	\$12,174,093	\$13,902,503	\$1,728,410	14%
3	MEDICAID	\$12,559,457	\$15,008,569	\$2,449,112	20%
4	MEDICAID MANAGED CARE	\$9,180,812	\$10,021,003	\$840,191	9%
5	CHAMPUS/TRICARE	\$2,651,102	\$2,330,732	(\$320,370)	-12%
6	COMMERCIAL INSURANCE	\$3,581,405	\$4,190,681	\$609,276	17%
7	NON-GOVERNMENT MANAGED CARE	\$64,344,529	\$66,232,519	\$1,887,990	3%
8	WORKER'S COMPENSATION	\$3,491,500	\$3,904,478	\$412,978	12%
9	SELF- PAY/UNINSURED	\$4,648,083	\$3,827,835	(\$820,248)	-18%
10	SAGA	\$8,457,589	\$7,076,404	(\$1,381,185)	-16%
11	OTHER	\$990,474	\$1,093,969	\$103,495	10%
	TOTAL INPATIENT GROSS REVENUE	\$225,853,434	\$232,397,678	\$6,544,244	3%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$91,235,645	\$93,695,394	\$2,459,749	3%
2	MEDICARE MANAGED CARE	\$11,292,497	\$13,298,536	\$2,006,039	18%
3	MEDICAID	\$14,472,177	\$21,296,695	\$6,824,518	47%
4	MEDICAID MANAGED CARE	\$22,884,220	\$27,669,680	\$4,785,460	21%
5	CHAMPUS/TRICARE	\$6,720,868	\$7,195,831	\$474,963	7%
6	COMMERCIAL INSURANCE	\$8,845,432	\$7,953,487	(\$891,945)	-10%
7	NON-GOVERNMENT MANAGED CARE	\$148,714,892	\$153,736,614	\$5,021,722	3%
8	WORKER'S COMPENSATION	\$6,671,090	\$6,585,599	(\$85,491)	-1%
9	SELF- PAY/UNINSURED	\$11,539,441	\$10,114,453	(\$1,424,988)	-12%
10	SAGA	\$11,443,409	\$10,447,321	(\$996,088)	-9%
11	OTHER	\$967,949	\$999,437	\$31,488	3%
	TOTAL OUTPATIENT GROSS REVENUE	\$334,787,620	\$352,993,047	\$18,205,427	5%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$195,010,035	\$198,504,379	\$3,494,344	2%
2	MEDICARE MANAGED CARE	\$23,466,590	\$27,201,039	\$3,734,449	16%
3	MEDICAID	\$27,031,634	\$36,305,264	\$9,273,630	34%
4	MEDICAID MANAGED CARE	\$32,065,032	\$37,690,683	\$5,625,651	18%
5	CHAMPUS/TRICARE	\$9,371,970	\$9,526,563	\$154,593	2%
6	COMMERCIAL INSURANCE	\$12,426,837	\$12,144,168	(\$282,669)	-2%
7	NON-GOVERNMENT MANAGED CARE	\$213,059,421	\$219,969,133	\$6,909,712	3%
8	WORKER'S COMPENSATION	\$10,162,590	\$10,490,077	\$327,487	3%
9	SELF- PAY/UNINSURED	\$16,187,524	\$13,942,288	(\$2,245,236)	-14%
10	SAGA	\$19,900,998	\$17,523,725	(\$2,377,273)	-12%
11	OTHER	\$1,958,423	\$2,093,406	\$134,983	7%
	TOTAL GROSS REVENUE	\$560,641,054	\$585,390,725	\$24,749,671	4%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$41,315,073	\$44,095,808	\$2,780,735	7%
2	MEDICARE MANAGED CARE	\$5,162,259	\$5,928,822	\$766,563	15%
3	MEDICAID	\$3,582,546	\$3,703,768	\$121,222	3%
4	MEDICAID MANAGED CARE	\$2,598,714	\$2,864,732	\$266,018	10%
5	CHAMPUS/TRICARE	\$1,174,297	\$909,649	(\$264,648)	-23%
6	COMMERCIAL INSURANCE	\$3,078,085	\$3,677,597	\$599,512	19%
7	NON-GOVERNMENT MANAGED CARE	\$49,428,042	\$49,832,566	\$404,524	1%
8	WORKER'S COMPENSATION	\$2,792,546	\$2,805,303	\$12,757	0%
9	SELF- PAY/UNINSURED	\$839,769	\$928,196	\$88,427	11%
10	SAGA	\$1,278,014	\$817,534	(\$460,480)	-36%
11	OTHER	\$151,073	\$268,241	\$117,168	78%
	TOTAL INPATIENT NET REVENUE	\$111,400,418	\$115,832,216	\$4,431,798	4%
B. OUTPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$21,982,666	\$23,828,711	\$1,846,045	8%
2	MEDICARE MANAGED CARE	\$2,715,894	\$3,116,078	\$400,184	15%
3	MEDICAID	\$2,935,239	\$4,906,489	\$1,971,250	67%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	MEDICAID MANAGED CARE	\$7,220,658	\$8,443,104	\$1,222,446	17%
5	CHAMPUS/TRICARE	\$2,520,995	\$2,206,442	(\$314,553)	-12%
6	COMMERCIAL INSURANCE	\$7,207,698	\$6,671,868	(\$535,830)	-7%
7	NON-GOVERNMENT MANAGED CARE	\$80,032,583	\$84,818,735	\$4,786,152	6%
8	WORKER'S COMPENSATION	\$4,902,939	\$4,947,566	\$44,627	1%
9	SELF- PAY/UNINSURED	\$2,437,935	\$2,171,511	(\$266,424)	-11%
10	SAGA	\$1,928,582	\$1,407,561	(\$521,021)	-27%
11	OTHER	\$344,588	\$272,332	(\$72,256)	-21%
	TOTAL OUTPATIENT NET REVENUE	\$134,229,777	\$142,790,397	\$8,560,620	6%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$63,297,739	\$67,924,519	\$4,626,780	7%
2	MEDICARE MANAGED CARE	\$7,878,153	\$9,044,900	\$1,166,747	15%
3	MEDICAID	\$6,517,785	\$8,610,257	\$2,092,472	32%
4	MEDICAID MANAGED CARE	\$9,819,372	\$11,307,836	\$1,488,464	15%
5	CHAMPUS/TRICARE	\$3,695,292	\$3,116,091	(\$579,201)	-16%
6	COMMERCIAL INSURANCE	\$10,285,783	\$10,349,465	\$63,682	1%
7	NON-GOVERNMENT MANAGED CARE	\$129,460,625	\$134,651,301	\$5,190,676	4%
8	WORKER'S COMPENSATION	\$7,695,485	\$7,752,869	\$57,384	1%
9	SELF- PAY/UNINSURED	\$3,277,704	\$3,099,707	(\$177,997)	-5%
10	SAGA	\$3,206,596	\$2,225,095	(\$981,501)	-31%
11	OTHER	\$495,661	\$540,573	\$44,912	9%
	TOTAL NET REVENUE	\$245,630,195	\$258,622,613	\$12,992,418	5%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	4,537	4,635	98	2%
2	MEDICARE MANAGED CARE	502	594	92	18%
3	MEDICAID	673	783	110	16%
4	MEDICAID MANAGED CARE	1,091	1,108	17	2%
5	CHAMPUS/TRICARE	237	217	(20)	-8%
6	COMMERCIAL INSURANCE	188	171	(17)	-9%
7	NON-GOVERNMENT MANAGED CARE	3,891	3,964	73	2%
8	WORKER'S COMPENSATION	117	129	12	10%
9	SELF- PAY/UNINSURED	265	176	(89)	-34%
10	SAGA	339	333	(6)	-2%
11	OTHER	45	65	20	44%
	TOTAL DISCHARGES	11,885	12,175	290	2%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	23,279	22,838	(441)	-2%
2	MEDICARE MANAGED CARE	2,728	2,655	(73)	-3%
3	MEDICAID	3,153	3,877	724	23%
4	MEDICAID MANAGED CARE	3,117	2,783	(334)	-11%
5	CHAMPUS/TRICARE	649	549	(100)	-15%
6	COMMERCIAL INSURANCE	655	776	121	18%
7	NON-GOVERNMENT MANAGED CARE	13,164	12,659	(505)	-4%
8	WORKER'S COMPENSATION	360	474	114	32%
9	SELF- PAY/UNINSURED	1,101	878	(223)	-20%
10	SAGA	1,665	1,467	(198)	-12%
11	OTHER	161	140	(21)	-13%
	TOTAL PATIENT DAYS	50,032	49,096	(936)	-2%
C.	OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	110,601	104,707	(5,894)	-5%
2	MEDICARE MANAGED CARE	10,953	15,073	4,120	38%
3	MEDICAID	15,066	29,696	14,630	97%
4	MEDICAID MANAGED CARE	31,568	26,045	(5,523)	-17%
5	CHAMPUS/TRICARE	7,697	7,821	124	2%
6	COMMERCIAL INSURANCE	8,717	7,170	(1,547)	-18%
7	NON-GOVERNMENT MANAGED CARE	185,661	179,433	(6,228)	-3%
8	WORKER'S COMPENSATION	5,532	5,176	(356)	-6%
9	SELF- PAY/UNINSURED	16,997	15,029	(1,968)	-12%
10	SAGA	10,957	9,465	(1,492)	-14%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
11	OTHER	909	935	26	3%
	TOTAL OUTPATIENT VISITS	404,658	400,550	(4,108)	-1%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$15,169,593	\$16,718,378	\$1,548,785	10%
2	MEDICARE MANAGED CARE	\$1,471,167	\$2,400,868	\$929,701	63%
3	MEDICAID	\$5,514,203	\$7,996,302	\$2,482,099	45%
4	MEDICAID MANAGED CARE	\$12,199,998	\$14,646,020	\$2,446,022	20%
5	CHAMPUS/TRICARE	\$2,347,986	\$2,225,253	(\$122,733)	-5%
6	COMMERCIAL INSURANCE	\$2,666,330	\$2,730,836	\$64,506	2%
7	NON-GOVERNMENT MANAGED CARE	\$29,872,032	\$31,020,170	\$1,148,138	4%
8	WORKER'S COMPENSATION	\$1,569,894	\$1,597,415	\$27,521	2%
9	SELF- PAY/UNINSURED	\$8,298,404	\$7,398,856	(\$899,548)	-11%
10	SAGA	\$6,110,223	\$4,813,725	(\$1,296,498)	-21%
11	OTHER	\$681,915	\$710,030	\$28,115	4%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$85,901,745	\$92,257,853	\$6,356,108	7%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$4,463,680	\$4,464,376	\$696	0%
2	MEDICARE MANAGED CARE	\$456,870	\$662,926	\$206,056	45%
3	MEDICAID	\$1,321,314	\$1,764,584	\$443,270	34%
4	MEDICAID MANAGED CARE	\$3,888,659	\$4,416,586	\$527,927	14%
5	CHAMPUS/TRICARE	\$1,106,584	\$950,228	(\$156,356)	-14%
6	COMMERCIAL INSURANCE	\$2,324,389	\$2,249,243	(\$75,146)	-3%
7	NON-GOVERNMENT MANAGED CARE	\$21,652,931	\$22,604,197	\$951,266	4%
8	WORKER'S COMPENSATION	\$1,288,481	\$1,322,542	\$34,061	3%
9	SELF- PAY/UNINSURED	\$1,753,202	\$1,587,794	(\$165,408)	-9%
10	SAGA	\$857,416	\$746,355	(\$111,061)	-13%
11	OTHER	\$184,387	\$176,547	(\$7,840)	-4%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$39,297,913	\$40,945,378	\$1,647,465	4%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	7,819	8,420	601	8%
2	MEDICARE MANAGED CARE	696	1,176	480	69%
3	MEDICAID	3,508	5,384	1,876	53%
4	MEDICAID MANAGED CARE	11,975	12,493	518	4%
5	CHAMPUS/TRICARE	1,680	1,672	(8)	0%
6	COMMERCIAL INSURANCE	1,484	1,242	(242)	-16%
7	NON-GOVERNMENT MANAGED CARE	19,136	18,714	(422)	-2%
8	WORKER'S COMPENSATION	1,305	1,312	7	1%
9	SELF- PAY/UNINSURED	5,494	5,308	(186)	-3%
10	SAGA	3,830	3,051	(779)	-20%
11	OTHER	378	398	20	5%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	57,305	59,170	1,865	3%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$39,916,076	\$40,612,798	\$696,722	2%
2	Physician Salaries	\$9,282,412	\$11,850,977	\$2,568,565	28%
3	Non-Nursing, Non-Physician Salaries	\$60,399,069	\$54,917,330	(\$5,481,739)	-9%
	Total Salaries & Wages	\$109,597,557	\$107,381,105	(\$2,216,452)	-2%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$7,644,307	\$7,936,981	\$292,674	4%
2	Physician Fringe Benefits	\$1,600,541	\$1,934,151	\$333,610	21%
3	Non-Nursing, Non-Physician Fringe Benefits	\$18,181,054	\$17,310,311	(\$870,743)	-5%
	Total Fringe Benefits	\$27,425,902	\$27,181,443	(\$244,459)	-1%
C. Contractual Labor Fees:					
1	Nursing Fees	\$40,515	\$0	(\$40,515)	-100%
2	Physician Fees	\$2,586,476	\$1,797,921	(\$788,555)	-30%
3	Non-Nursing, Non-Physician Fees	\$3,743,789	\$8,950,873	\$5,207,084	139%
	Total Contractual Labor Fees	\$6,370,780	\$10,748,794	\$4,378,014	69%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$30,623,661	\$30,933,870	\$310,209	1%
2	Pharmaceutical Costs	\$9,916,129	\$10,711,551	\$795,422	8%
	Total Medical Supplies and Pharmaceutical Cost	\$40,539,790	\$41,645,421	\$1,105,631	3%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$8,009,297	\$8,588,369	\$579,072	7%
2	Depreciation-Equipment	\$7,710,400	\$8,528,880	\$818,480	11%
3	Amortization	\$1,219,672	\$362,877	(\$856,795)	-70%
	Total Depreciation and Amortization	\$16,939,369	\$17,480,126	\$540,757	3%
F. Bad Debts:					
1	Bad Debts	\$16,898,318	\$14,409,876	(\$2,488,442)	-15%
G. Interest Expense:					
1	Interest Expense	\$3,091,298	\$3,185,038	\$93,740	3%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$119,872	\$2,443,084	\$2,323,212	1938%
I. Utilities:					
1	Water	\$200,940	\$262,233	\$61,293	31%
2	Natural Gas	\$1,491,198	\$1,396,469	(\$94,729)	-6%
3	Oil	\$50,987	\$36,248	(\$14,739)	-29%
4	Electricity	\$2,329,898	\$2,410,521	\$80,623	3%
5	Telephone	\$376,799	\$473,261	\$96,462	26%
6	Other Utilities	\$39,603	\$37,600	(\$2,003)	-5%
	Total Utilities	\$4,489,425	\$4,616,332	\$126,907	3%
J. Business Expenses:					
1	Accounting Fees	\$237,772	\$161,316	(\$76,456)	-32%
2	Legal Fees	\$1,150,211	\$1,687,711	\$537,500	47%
3	Consulting Fees	\$1,342,429	\$13,152,134	\$11,809,705	880%
4	Dues and Membership	\$1,059,445	\$1,077,356	\$17,911	2%
5	Equipment Leases	\$492,701	\$374,971	(\$117,730)	-24%
6	Building Leases	\$1,532,397	\$1,133,067	(\$399,330)	-26%
7	Repairs and Maintenance	\$889,450	\$1,038,117	\$148,667	17%
8	Insurance	\$627,910	\$626,528	(\$1,382)	0%
9	Travel	\$90,821	\$60,286	(\$30,535)	-34%
10	Conferences	\$652,953	\$373,852	(\$279,101)	-43%
11	Property Tax	\$54,419	\$168,754	\$114,335	210%
12	General Supplies	\$2,224,916	\$1,697,869	(\$527,047)	-24%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	%
13	Licenses and Subscriptions	\$67,994	\$61,340	(\$6,654)	-10%
14	Postage and Shipping	\$606,425	\$671,315	\$64,890	11%
15	Advertising	\$137,509	\$154,483	\$16,974	12%
16	Other Business Expenses	\$14,006,908	\$10,571,965	(\$3,434,943)	-25%
	Total Business Expenses	\$25,174,260	\$33,011,064	\$7,836,804	31%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$250,646,571	\$262,102,283	\$11,455,712	5%
*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.					
II. OPERATING EXPENSE BY DEPARTMENT					
A.	General Services:				
1	General Administration	\$49,810,195	\$59,747,025	\$9,936,830	20%
2	General Accounting	\$1,257,974	\$1,255,493	(\$2,481)	0%
3	Patient Billing & Collection	\$2,571,477	\$2,658,979	\$87,502	3%
4	Admitting / Registration Office	\$2,379,328	\$2,599,801	\$220,473	9%
5	Data Processing	\$7,248,520	\$7,446,721	\$198,201	3%
6	Communications	\$768,445	\$392,539	(\$375,906)	-49%
7	Personnel	\$30,715,019	\$29,525,066	(\$1,189,953)	-4%
8	Public Relations	\$276,992	\$1,109,444	\$832,452	301%
9	Purchasing	\$1,295,787	\$1,159,243	(\$136,544)	-11%
10	Dietary and Cafeteria	\$3,454,217	\$3,261,812	(\$192,405)	-6%
11	Housekeeping	\$2,599,711	\$2,703,461	\$103,750	4%
12	Laundry & Linen	\$135,725	\$148,927	\$13,202	10%
13	Operation of Plant	\$5,455,920	\$5,846,025	\$390,105	7%
14	Security	\$1,161,742	\$1,243,640	\$81,898	7%
15	Repairs and Maintenance	\$2,573,335	\$2,340,698	(\$232,637)	-9%
16	Central Sterile Supply	\$1,646,474	\$1,650,375	\$3,901	0%
17	Pharmacy Department	\$12,080,252	\$13,368,665	\$1,288,413	11%
18	Other General Services	\$0	\$0	\$0	0%
	Total General Services	\$125,431,113	\$136,457,914	\$11,026,801	9%
B.	Professional Services:				
1	Medical Care Administration	\$348,882	\$364,534	\$15,652	4%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,322,766	\$1,447,097	\$124,331	9%
4	Medical Records	\$2,856,372	\$2,934,730	\$78,358	3%
5	Social Service	\$1,246,746	\$1,726,596	\$479,850	38%
6	Other Professional Services	\$1,375,087	\$1,475,915	\$100,828	7%
	Total Professional Services	\$7,149,853	\$7,948,872	\$799,019	11%
C.	Special Services:				
1	Operating Room	\$10,342,457	\$10,064,234	(\$278,223)	-3%
2	Recovery Room	\$2,220,414	\$2,206,514	(\$13,900)	-1%
3	Anesthesiology	\$1,630,321	\$1,229,735	(\$400,586)	-25%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$7,288,013	\$7,948,548	\$660,535	9%
6	Diagnostic Ultrasound	\$1,249,134	\$1,190,662	(\$58,472)	-5%
7	Radiation Therapy	\$3,058,438	\$3,052,516	(\$5,922)	0%
8	Radioisotopes	\$1,176,242	\$1,110,460	(\$65,782)	-6%
9	CT Scan	\$2,110,470	\$2,003,193	(\$107,277)	-5%
10	Laboratory	\$11,171,388	\$10,780,296	(\$391,092)	-4%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$1,342,514	\$1,397,799	\$55,285	4%
13	Electrocardiology	\$239,542	\$225,326	(\$14,216)	-6%
14	Electroencephalography	\$184,794	\$136,933	(\$47,861)	-26%
15	Occupational Therapy	\$0	\$0	\$0	0%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$2,124,335	\$1,971,534	(\$152,801)	-7%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$1,090,231	\$1,144,312	\$54,081	5%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$1,528,362	\$1,993,786	\$465,424	30%
23	Renal Dialysis	\$633,212	\$523,255	(\$109,957)	-17%
24	Emergency Room	\$15,025,144	\$14,824,028	(\$201,116)	-1%
25	MRI	\$2,524,317	\$2,516,057	(\$8,260)	0%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$718,596	\$751,571	\$32,975	5%
28	Endoscopy	\$1,444,707	\$1,280,992	(\$163,715)	-11%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$195,950	\$321,828	\$125,878	64%
31	Cardiac Catheterization/Rehabilitation	\$1,233,112	\$1,499,554	\$266,442	22%
32	Occupational Therapy / Physical Therapy	\$1,705,291	\$1,801,026	\$95,735	6%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$14,942,378	\$15,838,336	\$895,958	6%
	Total Special Services	\$85,179,362	\$85,812,495	\$633,133	1%
D.	Routine Services:				
1	Medical & Surgical Units	\$18,923,009	\$18,299,070	(\$623,939)	-3%
2	Intensive Care Unit	\$3,212,840	\$3,107,920	(\$104,920)	-3%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,337,598	\$2,094,332	(\$243,266)	-10%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,215,408	\$4,067,894	(\$147,514)	-3%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$0	\$0	\$0	0%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$3,758,441	\$3,880,055	\$121,614	3%
13	Other Routine Services	\$438,947	\$433,731	(\$5,216)	-1%
	Total Routine Services	\$32,886,243	\$31,883,002	(\$1,003,241)	-3%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	Total Operating Expenses - All Departments*	\$250,646,571	\$262,102,283	\$11,455,712	5%
*A.- 0. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.					

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$242,131,827	\$ 259,652,271	\$270,048,715
2	Other Operating Revenue	4,421,056	3,773,294	4,374,927
3	Total Operating Revenue	\$246,552,883	\$263,425,565	\$274,423,642
4	Total Operating Expenses	237,933,157	250,646,571	262,102,283
5	Income/(Loss) From Operations	\$8,619,726	\$12,778,994	\$12,321,359
6	Total Non-Operating Revenue	(5,612,420)	(1,302,635)	6,430,426
7	Excess/(Deficiency) of Revenue Over Expenses	\$3,007,306	\$11,476,359	\$18,751,785
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	3.58%	4.88%	4.39%
2	Hospital Non Operating Margin	-2.33%	-0.50%	2.29%
3	Hospital Total Margin	1.25%	4.38%	6.68%
4	Income/(Loss) From Operations	\$8,619,726	\$12,778,994	\$12,321,359
5	Total Operating Revenue	\$246,552,883	\$263,425,565	\$274,423,642
6	Total Non-Operating Revenue	(\$5,612,420)	(\$1,302,635)	\$6,430,426
7	Total Revenue	\$240,940,463	\$262,122,930	\$280,854,068
8	Excess/(Deficiency) of Revenue Over Expenses	\$3,007,306	\$11,476,359	\$18,751,785
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$132,391,851	\$102,294,307	\$147,348,055
2	Hospital Total Net Assets	\$140,788,086	\$112,603,569	\$158,925,018
3	Hospital Change in Total Net Assets	(\$22,926,908)	(\$28,184,517)	\$46,321,449
4	Hospital Change in Total Net Assets %	86.0%	-20.0%	41.1%
D. <u>Cost Data Summary</u>				
1	Ratio of Cost to Charges	0.44	0.44	0.44
2	Total Operating Expenses	\$225,599,529	\$250,646,571	\$262,102,283
3	Total Gross Revenue	\$512,314,358	\$560,641,054	\$585,390,725
4	Total Other Operating Revenue	\$1,746,162	\$3,773,294	\$4,374,927
5	Private Payment to Cost Ratio	1.42	1.41	1.42
6	Total Non-Government Payments	\$138,717,900	\$150,719,597	\$155,853,342

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010
7	Total Uninsured Payments	\$3,253,424	\$3,277,704	\$3,099,707
8	Total Non-Government Charges	\$232,714,541	\$251,836,372	\$256,545,666
9	Total Uninsured Charges	\$15,155,191	\$16,187,524	\$13,942,288
10	<u>Medicare Payment to Cost Ratio</u>	0.81	0.73	0.77
11	Total Medicare Payments	\$72,052,748	\$71,175,892	\$76,969,419
12	Total Medicare Charges	\$201,661,128	\$218,476,625	\$225,705,418
13	<u>Medicaid Payment to Cost Ratio</u>	0.60	0.62	0.61
14	Total Medicaid Payments	\$13,094,763	\$16,337,157	\$19,918,093
15	Total Medicaid Charges	\$49,808,687	\$59,096,666	\$73,995,947
16	<u>Uncompensated Care Cost</u>	\$9,061,214	\$10,540,405	\$9,257,065
17	Charity Care	\$6,296,582	\$6,641,717	\$6,321,367
18	Bad Debts	\$14,350,680	\$17,093,520	\$14,508,284
19	Total Uncompensated Care	\$20,647,262	\$23,735,237	\$20,829,651
20	<u>Uncompensated Care % of Total Expenses</u>	4.0%	4.2%	3.5%
21	Total Operating Expenses	\$225,599,529	\$250,646,571	\$262,102,283
E.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	3.55	3.69	3.90
2	Total Current Assets	\$94,120,472	\$108,982,983	\$116,727,013
3	Total Current Liabilities	\$26,530,147	\$29,558,387	\$29,948,555
4	<u>Days Cash on Hand</u>	77	90	108
5	Cash and Cash Equivalents	\$46,717,416	\$57,570,735	\$72,131,779
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$46,717,416	\$57,570,735	\$72,131,779
8	Total Operating Expenses	\$237,933,157	\$250,646,571	\$262,102,283
9	Depreciation Expense	\$16,453,137	\$16,939,369	\$17,480,126
10	Operating Expenses less Depreciation Expense	\$221,480,020	\$233,707,202	\$244,622,157
11	<u>Days Revenue in Patient Accounts Receivable</u>	48.86	48.19	38.04

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010
12	Net Patient Accounts Receivable	\$ 33,683,248	\$ 36,111,295	\$ 30,758,941
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,270,638	\$1,831,013	\$2,614,222
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 32,412,610	\$ 34,280,282	\$ 28,144,719
16	Total Net Patient Revenue	\$242,131,827	\$ 259,652,271	\$ 270,048,715
17	<u>Average Payment Period</u>	43.72	46.16	44.69
18	Total Current Liabilities	\$26,530,147	\$29,558,387	\$29,948,555
19	Total Operating Expenses	\$237,933,157	\$250,646,571	\$262,102,283
20	Depreciation Expense	\$16,453,137	\$16,939,369	\$17,480,126
21	Total Operating Expenses less Depreciation Expense	\$221,480,020	\$233,707,202	\$244,622,157
F. <u>Solvency Measures Summary</u>				
1	<u>Equity Financing Ratio</u>	48.8	36.1	47.4
2	Total Net Assets	\$140,788,086	\$112,603,569	\$158,925,018
3	Total Assets	\$288,701,998	\$312,091,820	\$335,070,249
4	<u>Cash Flow to Total Debt Ratio</u>	21.1	30.4	38.3
5	Excess/(Deficiency) of Revenues Over Expenses	\$3,007,306	\$11,476,359	\$18,751,785
6	Depreciation Expense	\$16,453,137	\$16,939,369	\$17,480,126
7	Excess of Revenues Over Expenses and Depreciation Expense	\$19,460,443	\$28,415,728	\$36,231,911
8	Total Current Liabilities	\$26,530,147	\$29,558,387	\$29,948,555
9	Total Long Term Debt	\$65,808,169	\$63,931,536	\$64,591,831
10	Total Current Liabilities and Total Long Term Debt	\$92,338,316	\$93,489,923	\$94,540,386
11	<u>Long Term Debt to Capitalization Ratio</u>	31.9	36.2	28.9
12	Total Long Term Debt	\$65,808,169	\$63,931,536	\$64,591,831
13	Total Net Assets	\$140,788,086	\$112,603,569	\$158,925,018
14	Total Long Term Debt and Total Net Assets	\$206,596,255	\$176,535,105	\$223,516,849
15	<u>Debt Service Coverage Ratio</u>	7.5	6.5	7.8
16	Excess Revenues over Expenses	\$3,007,306	\$11,476,359	\$18,751,785
17	Interest Expense	\$3,003,005	\$3,091,298	\$3,185,038
18	Depreciation and Amortization Expense	\$16,453,137	\$16,939,369	\$17,480,126

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	ACTUAL FY 2010
19	Principal Payments	\$0	\$1,755,000	\$1,838,414
G. <u>Other Financial Ratios</u>				
20	Average Age of Plant	6.1	6.8	7.6
21	Accumulated Depreciation	\$100,305,907	\$114,398,504	\$132,727,325
22	Depreciation and Amortization Expense	\$16,453,137	\$16,939,369	\$17,480,126
H. <u>Utilization Measures Summary</u>				
1	Patient Days	50,512	50,032	49,096
2	Discharges	11,940	11,885	12,175
3	ALOS	4.2	4.2	4.0
4	Staffed Beds	202	202	202
5	Available Beds	-	233	233
6	Licensed Beds	233	233	233
6	Occupancy of Staffed Beds	68.5%	67.9%	66.6%
7	Occupancy of Available Beds	59.4%	58.8%	57.7%
8	Full Time Equivalent Employees	1,503.2	1,583.5	1,542.1
I. <u>Hospital Gross Revenue Payer Mix Percentage</u>				
1	Non-Government Gross Revenue Payer Mix Percentage	42.5%	42.0%	41.4%
2	Medicare Gross Revenue Payer Mix Percentage	39.4%	39.0%	38.6%
3	Medicaid Gross Revenue Payer Mix Percentage	9.7%	10.5%	12.6%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	3.5%	3.9%	3.4%
5	Uninsured Gross Revenue Payer Mix Percentage	3.0%	2.9%	2.4%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	2.0%	1.7%	1.6%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$217,559,350	\$235,648,848	\$242,603,378
9	Medicare Gross Revenue (Charges)	\$201,661,128	\$218,476,625	\$225,705,418
10	Medicaid Gross Revenue (Charges)	\$49,808,687	\$59,096,666	\$73,995,947
11	Other Medical Assistance Gross Revenue (Charges)	\$18,025,414	\$21,859,421	\$19,617,131
12	Uninsured Gross Revenue (Charges)	\$15,155,191	\$16,187,524	\$13,942,288
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$10,104,588	\$9,371,970	\$9,526,563
14	Total Gross Revenue (Charges)	\$512,314,358	\$560,641,054	\$585,390,725
J. <u>Hospital Net Revenue Payer Mix Percentage</u>				
1	Non-Government Net Revenue Payer Mix Percentage	58.8%	60.0%	59.1%

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	ACTUAL FY 2010
2	Medicare Net Revenue Payer Mix Percentage	31.3%	29.0%	29.8%
3	Medicaid Net Revenue Payer Mix Percentage	5.7%	6.7%	7.7%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.3%	1.5%	1.1%
5	Uninsured Net Revenue Payer Mix Percentage	1.4%	1.3%	1.2%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	1.6%	1.5%	1.2%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$135,464,476	\$147,441,893	\$152,753,635
9	Medicare Net Revenue (Payments)	\$72,052,748	\$71,175,892	\$76,969,419
10	Medicaid Net Revenue (Payments)	\$13,094,763	\$16,337,157	\$19,918,093
11	Other Medical Assistance Net Revenue (Payments)	\$2,991,669	\$3,702,257	\$2,765,668
12	Uninsured Net Revenue (Payments)	\$3,253,424	\$3,277,704	\$3,099,707
13	CHAMPUS / TRICARE Net Revenue Payments)	\$3,673,879	\$3,695,292	\$3,116,091
14	Total Net Revenue (Payments)	\$230,530,959	\$245,630,195	\$258,622,613
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	4,720	4,461	4,440
2	Medicare	5,048	5,039	5,229
3	Medical Assistance	1,908	2,148	2,289
4	Medicaid	1,459	1,764	1,891
5	Other Medical Assistance	449	384	398
6	CHAMPUS / TRICARE	264	237	217
7	Uninsured (Included In Non-Government)	350	265	176
8	Total	11,940	11,885	12,175
L.	Case Mix Index			
1	Non-Government (Including Self Pay / Uninsured)	1.363700	1.315100	1.216000
2	Medicare	1.405400	1.459000	1.417000
3	Medical Assistance	1.055628	0.961921	0.934102
4	Medicaid	1.018400	0.894400	0.886200
5	Other Medical Assistance	1.176600	1.272100	1.161700
6	CHAMPUS / TRICARE	1.044000	0.940800	0.787400
7	Uninsured (Included In Non-Government)	1.135000	1.184800	1.011900
8	Total Case Mix Index	1.325031	1.304816	1.241688
M.	Emergency Department Visits			
1	Emergency Room - Treated and Admitted	6,561	6,343	6,391
2	Emergency Room - Treated and Discharged	52,432	57,305	59,170
3	Total Emergency Room Visits	58,993	63,648	65,561

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$1,079,457	\$979,350	(\$100,107)	-9%
2	Inpatient Payments	\$474,576	\$420,710	(\$53,866)	-11%
3	Outpatient Charges	\$725,182	\$934,602	\$209,420	29%
4	Outpatient Payments	\$180,461	\$224,671	\$44,210	24%
5	Discharges	33	47	14	42%
6	Patient Days	208	240	32	15%
7	Outpatient Visits (Excludes ED Visits)	577	705	128	22%
8	Emergency Department Outpatient Visits	55	59	4	7%
9	Emergency Department Inpatient Admissions	23	41	18	78%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,804,639	\$1,913,952	\$109,313	6%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$655,037	\$645,381	(\$9,656)	-1%
B. CIGNA HEALTHCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$2,583,465	\$2,997,090	\$413,625	16%
2	Inpatient Payments	\$985,800	\$1,242,698	\$256,898	26%
3	Outpatient Charges	\$2,333,755	\$2,862,650	\$528,895	23%
4	Outpatient Payments	\$559,534	\$645,809	\$86,275	15%
5	Discharges	88	114	26	30%
6	Patient Days	558	563	5	1%
7	Outpatient Visits (Excludes ED Visits)	1,773	1,888	115	6%
8	Emergency Department Outpatient Visits	112	102	(10)	-9%
9	Emergency Department Inpatient Admissions	59	66	7	12%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,917,220	\$5,859,740	\$942,520	19%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,545,334	\$1,888,507	\$343,173	22%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$6,333,429	\$6,616,255	\$282,826	4%
2	Inpatient Payments	\$2,820,362	\$2,870,799	\$50,437	2%
3	Outpatient Charges	\$6,817,225	\$7,454,236	\$637,011	9%
4	Outpatient Payments	\$1,596,001	\$1,769,876	\$173,875	11%
5	Discharges	297	284	(13)	-4%
6	Patient Days	1,356	1,359	3	0%
7	Outpatient Visits (Excludes ED Visits)	5,924	5,809	(115)	-2%
8	Emergency Department Outpatient Visits	374	422	48	13%
9	Emergency Department Inpatient Admissions	213	212	(1)	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$13,150,654	\$14,070,491	\$919,837	7%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,416,363	\$4,640,675	\$224,312	5%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$2,020,462	\$1,805,617	(\$214,845)	-11%
2	Inpatient Payments	\$806,330	\$776,208	(\$30,122)	-4%
3	Outpatient Charges	\$1,188,857	\$790,277	(\$398,580)	-34%
4	Outpatient Payments	\$318,050	\$192,655	(\$125,395)	-39%
5	Discharges	76	86	10	13%
6	Patient Days	570	189	(381)	-67%
7	Outpatient Visits (Excludes ED Visits)	1,835	4,707	2,872	157%
8	Emergency Department Outpatient Visits	134	492	358	267%
9	Emergency Department Inpatient Admissions	70	70	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,209,319	\$2,595,894	(\$613,425)	-19%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,124,380	\$968,863	(\$155,517)	-14%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$29,093	\$0	(\$29,093)	-100%
2	Inpatient Payments	\$5,589	\$0	(\$5,589)	-100%
3	Outpatient Charges	\$33,334	\$2,473	(\$30,861)	-93%
4	Outpatient Payments	\$6,990	\$500	(\$6,490)	-93%
5	Discharges	1	0	(1)	-100%
6	Patient Days	14	0	(14)	-100%
7	Outpatient Visits (Excludes ED Visits)	3	0	(3)	-100%
8	Emergency Department Outpatient Visits	5	2	(3)	-60%
9	Emergency Department Inpatient Admissions	1	0	(1)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$62,427	\$2,473	(\$59,954)	-96%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$12,579	\$500	(\$12,079)	-96%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$0	\$1,257,505	\$1,257,505	0%
2	Inpatient Payments	\$0	\$487,333	\$487,333	0%
3	Outpatient Charges	\$39,142	\$996,103	\$956,961	2445%
4	Outpatient Payments	\$12,472	\$218,977	\$206,505	1656%
5	Discharges	0	47	47	0%
6	Patient Days	0	252	252	0%
7	Outpatient Visits (Excludes ED Visits)	21	644	623	2967%
8	Emergency Department Outpatient Visits	6	78	72	1200%
9	Emergency Department Inpatient Admissions	0	28	28	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$39,142	\$2,253,608	\$2,214,466	5658%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$12,472	\$706,310	\$693,838	5563%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
I. AETNA					
1	Inpatient Charges	\$76,791	\$26,266	(\$50,525)	-66%
2	Inpatient Payments	\$31,095	\$11,855	(\$19,240)	-62%
3	Outpatient Charges	\$114,223	\$126,607	\$12,384	11%
4	Outpatient Payments	\$26,989	\$30,825	\$3,836	14%
5	Discharges	4	2	(2)	-50%
6	Patient Days	14	3	(11)	-79%
7	Outpatient Visits (Excludes ED Visits)	102	98	(4)	-4%
8	Emergency Department Outpatient Visits	8	10	2	25%
9	Emergency Department Inpatient Admissions	4	2	(2)	-50%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$191,014	\$152,873	(\$38,141)	-20%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$58,084	\$42,680	(\$15,404)	-27%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
J. HUMANA					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
K. SECURE HORIZONS					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L. UNICARE LIFE & HEALTH INSURANCE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
M. UNIVERSAL AMERICAN					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N. EVERCARE					
1	Inpatient Charges	\$51,396	\$220,420	\$169,024	329%
2	Inpatient Payments	\$38,507	\$119,219	\$80,712	210%
3	Outpatient Charges	\$40,779	\$131,588	\$90,809	223%
4	Outpatient Payments	\$15,397	\$32,765	\$17,368	113%
5	Discharges	3	14	11	367%
6	Patient Days	8	49	41	513%
7	Outpatient Visits (Excludes ED Visits)	22	46	24	109%
8	Emergency Department Outpatient Visits	2	11	9	450%
9	Emergency Department Inpatient Admissions	2	7	5	250%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$92,175	\$352,008	\$259,833	282%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$53,904	\$151,984	\$98,080	182%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$12,174,093	\$13,902,503	\$1,728,410	14%
	TOTAL INPATIENT PAYMENTS	\$5,162,259	\$5,928,822	\$766,563	15%
	TOTAL OUTPATIENT CHARGES	\$11,292,497	\$13,298,536	\$2,006,039	18%
	TOTAL OUTPATIENT PAYMENTS	\$2,715,894	\$3,116,078	\$400,184	15%
	TOTAL DISCHARGES	502	594	92	18%
	TOTAL PATIENT DAYS	2,728	2,655	(73)	-3%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	10,257	13,897	3,640	35%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	696	1,176	480	69%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	372	426	54	15%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$23,466,590	\$27,201,039	\$3,734,449	16%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$7,878,153	\$9,044,900	\$1,166,747	15%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$1,326,782	\$0	(\$1,326,782)	-100%
2	Inpatient Payments	\$331,575	\$0	(\$331,575)	-100%
3	Outpatient Charges	\$3,237,756	\$0	(\$3,237,756)	-100%
4	Outpatient Payments	\$936,071	\$0	(\$936,071)	-100%
5	Discharges	147	0	(147)	-100%
6	Patient Days	364	0	(364)	-100%
7	Outpatient Visits (Excludes ED Visits)	3,871	0	(3,871)	-100%
8	Emergency Department Outpatient Visits	1,419	0	(1,419)	-100%
9	Emergency Department Inpatient Admissions	36	0	(36)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,564,538	\$0	(\$4,564,538)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,267,646	\$0	(\$1,267,646)	-100%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$6,592,104	\$7,104,022	\$511,918	8%
2	Inpatient Payments	\$1,983,512	\$2,189,631	\$206,119	10%
3	Outpatient Charges	\$14,919,551	\$19,870,665	\$4,951,114	33%
4	Outpatient Payments	\$4,852,981	\$6,180,688	\$1,327,707	27%
5	Discharges	833	868	35	4%
6	Patient Days	2,451	1,969	(482)	-20%
7	Outpatient Visits (Excludes ED Visits)	11,762	10,360	(1,402)	-12%
8	Emergency Department Outpatient Visits	7,943	8,828	885	11%
9	Emergency Department Inpatient Admissions	164	155	(9)	-5%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$21,511,655	\$26,974,687	\$5,463,032	25%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6,836,493	\$8,370,319	\$1,533,826	22%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$0	\$2,008,176	\$2,008,176	0%
2	Inpatient Payments	\$0	\$485,946	\$485,946	0%
3	Outpatient Charges	\$0	\$3,836,416	\$3,836,416	0%
4	Outpatient Payments	\$0	\$1,167,599	\$1,167,599	0%
5	Discharges	0	177	177	0%
6	Patient Days	0	605	605	0%
7	Outpatient Visits (Excludes ED Visits)	0	1,718	1,718	0%
8	Emergency Department Outpatient Visits	0	1,618	1,618	0%
9	Emergency Department Inpatient Admissions	0	70	70	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$5,844,592	\$5,844,592	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$1,653,545	\$1,653,545	0%
E. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G. UNITED HEALTHCARE					
1	Inpatient Charges	\$357,762	\$0	(\$357,762)	-100%
2	Inpatient Payments	\$109,513	\$0	(\$109,513)	-100%
3	Outpatient Charges	\$1,732,678	\$0	(\$1,732,678)	-100%
4	Outpatient Payments	\$503,323	\$0	(\$503,323)	-100%
5	Discharges	37	0	(37)	-100%
6	Patient Days	109	0	(109)	-100%
7	Outpatient Visits (Excludes ED Visits)	1,760	0	(1,760)	-100%
8	Emergency Department Outpatient Visits	990	0	(990)	-100%
9	Emergency Department Inpatient Admissions	12	0	(12)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,090,440	\$0	(\$2,090,440)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$612,836	\$0	(\$612,836)	-100%
H. AETNA					
1	Inpatient Charges	\$904,164	\$908,805	\$4,641	1%
2	Inpatient Payments	\$174,114	\$189,155	\$15,041	9%
3	Outpatient Charges	\$2,994,235	\$3,962,599	\$968,364	32%
4	Outpatient Payments	\$928,283	\$1,094,817	\$166,534	18%
5	Discharges	74	63	(11)	-15%
6	Patient Days	193	209	16	8%
7	Outpatient Visits (Excludes ED Visits)	2,200	1,474	(726)	-33%
8	Emergency Department Outpatient Visits	1,623	2,047	424	26%
9	Emergency Department Inpatient Admissions	37	36	(1)	-3%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,898,399	\$4,871,404	\$973,005	25%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,102,397	\$1,283,972	\$181,575	16%
II. TOTAL MEDICAID MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$9,180,812	\$10,021,003	\$840,191	9%
	TOTAL INPATIENT PAYMENTS	\$2,598,714	\$2,864,732	\$266,018	10%
	TOTAL OUTPATIENT CHARGES	\$22,884,220	\$27,669,680	\$4,785,460	21%
	TOTAL OUTPATIENT PAYMENTS	\$7,220,658	\$8,443,104	\$1,222,446	17%
	TOTAL DISCHARGES	1,091	1,108	17	2%
	TOTAL PATIENT DAYS	3,117	2,783	(334)	-11%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	19,593	13,552	(6,041)	-31%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	11,975	12,493	518	4%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	249	261	12	5%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$32,065,032	\$37,690,683	\$5,625,651	18%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$9,819,372	\$11,307,836	\$1,488,464	15%

BACKUS CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$62,155,067	\$74,929,624	\$12,774,557	21%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$38,032,269	\$32,546,895	(\$5,485,374)	-14%
4	Current Assets Whose Use is Limited for Current Liabilities	\$7,240,812	\$7,931,590	\$690,778	10%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$3,367,607	\$3,885,317	\$517,710	15%
8	Prepaid Expenses	\$1,023,236	\$1,303,628	\$280,392	27%
9	Other Current Assets	\$533,993	\$185,866	(\$348,127)	-65%
	Total Current Assets	\$112,352,984	\$120,782,920	\$8,429,936	8%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$25,070,975	\$26,988,802	\$1,917,827	8%
2	Board Designated for Capital Acquisition	\$73,772,025	\$88,694,819	\$14,922,794	20%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$98,843,000	\$115,683,621	\$16,840,621	17%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$4,863,225	\$4,347,241	(\$515,984)	-11%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$217,477,989	\$232,092,918	\$14,614,929	7%
2	Less: Accumulated Depreciation	\$117,890,582	\$132,954,480	\$15,063,898	\$0
	Property, Plant and Equipment, Net	\$99,587,407	\$99,138,438	(\$448,969)	0%
3	Construction in Progress	\$4,251,661	\$630,806	(\$3,620,855)	-85%
	Total Net Fixed Assets	\$103,839,068	\$99,769,244	(\$4,069,824)	-4%
	Total Assets	\$319,898,277	\$340,583,026	\$20,684,749	6%

BACKUS CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2009 ACTUAL</u>	<u>FY 2010 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$11,143,511	\$10,942,326	(\$201,185)	-2%
2	Salaries, Wages and Payroll Taxes	\$8,955,228	\$6,905,328	(\$2,049,900)	-23%
3	Due To Third Party Payers	\$2,310,804	\$2,963,415	\$652,611	28%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,825,000	\$1,895,000	\$70,000	4%
6	Current Portion of Notes Payable	\$8,475	\$137,691	\$129,216	1525%
7	Other Current Liabilities	\$9,568,027	\$10,711,877	\$1,143,850	12%
	Total Current Liabilities	\$33,811,045	\$33,555,637	(\$255,408)	-1%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$63,931,536	\$61,987,072	(\$1,944,464)	-3%
2	Notes Payable (Net of Current Portion)	\$1,064,144	\$2,604,759	\$1,540,615	145%
	Total Long Term Debt	\$64,995,680	\$64,591,831	(\$403,849)	-1%
3	Accrued Pension Liability	\$75,300,446	\$50,267,036	(\$25,033,410)	-33%
4	Other Long Term Liabilities	\$30,705,381	\$31,337,809	\$632,428	2%
	Total Long Term Liabilities	\$171,001,507	\$146,196,676	(\$24,804,831)	-15%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$104,776,463	\$149,253,750	\$44,477,287	42%
2	Temporarily Restricted Net Assets	\$3,447,432	\$4,101,543	\$654,111	19%
3	Permanently Restricted Net Assets	\$6,861,830	\$7,475,420	\$613,590	9%
	Total Net Assets	\$115,085,725	\$160,830,713	\$45,744,988	40%
	Total Liabilities and Net Assets	\$319,898,277	\$340,583,026	\$20,684,749	6%

BACKUS CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009	FY 2010	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$578,445,014	\$604,461,491	\$26,016,477	4%
2	Less: Allowances	\$299,764,222	\$315,063,365	\$15,299,143	5%
3	Less: Charity Care	\$6,915,404	\$6,496,622	(\$418,782)	-6%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$271,765,388	\$282,901,504	\$11,136,116	4%
5	Other Operating Revenue	\$4,412,193	\$4,357,277	(\$54,916)	-1%
6	Net Assets Released from Restrictions	\$86,494	\$91,211	\$4,717	5%
	Total Operating Revenue	\$276,264,075	\$287,349,992	\$11,085,917	4%
B. Operating Expenses:					
1	Salaries and Wages	\$118,474,684	\$116,197,349	(\$2,277,335)	-2%
2	Fringe Benefits	\$29,445,026	\$29,622,058	\$177,032	1%
3	Physicians Fees	\$2,433,128	\$1,512,971	(\$920,157)	-38%
4	Supplies and Drugs	\$77,395,962	\$91,569,467	\$14,173,505	18%
5	Depreciation and Amortization	\$17,335,024	\$17,534,609	\$199,585	1%
6	Bad Debts	\$17,106,501	\$14,462,163	(\$2,644,338)	-15%
7	Interest	\$3,361,670	\$3,185,038	(\$176,632)	-5%
8	Malpractice	\$2,735,936	\$2,653,793	(\$82,143)	-3%
9	Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses	\$268,287,931	\$276,737,448	\$8,449,517	3%
	Income/(Loss) From Operations	\$7,976,144	\$10,612,544	\$2,636,400	33%
C. Non-Operating Revenue:					
1	Income from Investments	\$5,543,913	\$8,486,755	\$2,942,842	53%
2	Gifts, Contributions and Donations	\$429,646	\$328,840	(\$100,806)	-23%
3	Other Non-Operating Gains/(Losses)	(\$366,280)	\$77,066	\$443,346	-121%
	Total Non-Operating Revenue	\$5,607,279	\$8,892,661	\$3,285,382	59%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$13,583,423	\$19,505,205	\$5,921,782	44%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$13,583,423	\$19,505,205	\$5,921,782	44%

BACKUS CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008</u>	<u>FY 2009</u>	<u>FY 2010</u>
A. <u>Parent Corporation Statement of Operations Summary</u>				
1	Net Patient Revenue	\$251,767,293	\$271,765,388	\$282,901,504
2	Other Operating Revenue	5,003,372	4,498,687	4,448,488
3	Total Operating Revenue	\$256,770,665	\$276,264,075	\$287,349,992
4	Total Operating Expenses	251,916,811	268,287,931	276,737,448
5	Income/(Loss) From Operations	\$4,853,854	\$7,976,144	\$10,612,544
6	Total Non-Operating Revenue	(12,381,815)	5,607,279	8,892,661
7	Excess/(Deficiency) of Revenue Over Expenses	(\$7,527,961)	\$13,583,423	\$19,505,205
B. <u>Parent Corporation Profitability Summary</u>				
1	Parent Corporation Operating Margin	1.99%	2.83%	3.58%
2	Parent Corporation Non-Operating Margin	-5.07%	1.99%	3.00%
3	Parent Corporation Total Margin	-3.08%	4.82%	6.58%
4	Income/(Loss) From Operations	\$4,853,854	\$7,976,144	\$10,612,544
5	Total Operating Revenue	\$256,770,665	\$276,264,075	\$287,349,992
6	Total Non-Operating Revenue	(\$12,381,815)	\$5,607,279	\$8,892,661
7	Total Revenue	\$244,388,850	\$281,871,354	\$296,242,653
8	Excess/(Deficiency) of Revenue Over Expenses	(\$7,527,961)	\$13,583,423	\$19,505,205
C. <u>Parent Corporation Net Assets Summary</u>				
1	Parent Corporation Unrestricted Net Assets	\$136,705,366	\$104,776,463	\$149,253,750
2	Parent Corporation Total Net Assets	\$145,101,601	\$115,085,725	\$160,830,713
3	Parent Corporation Change in Total Net Assets	(\$23,290,929)	(\$30,015,876)	\$45,744,988
4	Parent Corporation Change in Total Net Assets %	86.2%	-20.7%	39.7%

BACKUS CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010
D.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	3.42	3.32	3.60
2	Total Current Assets	\$97,840,503	\$112,352,984	\$120,782,920
3	Total Current Liabilities	\$28,614,838	\$33,811,045	\$33,555,637
4	<u>Days Cash on Hand</u>	78	90	106
5	Cash and Cash Equivalents	\$50,429,864	\$62,155,067	\$74,929,624
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$50,429,864	\$62,155,067	\$74,929,624
8	Total Operating Expenses	\$251,916,811	\$268,287,931	\$276,737,448
9	Depreciation Expense	\$16,814,826	\$17,335,024	\$17,534,609
10	Operating Expenses less Depreciation Expense	\$235,101,985	\$250,952,907	\$259,202,839
11	<u>Days Revenue in Patient Accounts Receivable</u>	49	48	38
12	Net Patient Accounts Receivable	\$ 35,783,224	\$ 38,032,269	\$ 32,546,895
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,750,429	\$2,310,804	\$2,963,415
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 34,032,795	\$ 35,721,465	\$ 29,583,480
16	Total Net Patient Revenue	\$251,767,293	\$271,765,388	\$282,901,504
17	<u>Average Payment Period</u>	44	49	47
18	Total Current Liabilities	\$28,614,838	\$33,811,045	\$33,555,637
19	Total Operating Expenses	\$251,916,811	\$268,287,931	\$276,737,448
20	Depreciation Expense	\$16,814,826	\$17,335,024	\$17,534,609
21	Total Operating Expenses less Depreciation Expense	\$235,101,985	\$250,952,907	\$259,202,839

BACKUS CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	49.0	36.0	47.2
2	Total Net Assets	\$145,101,601	\$115,085,725	\$160,830,713
3	Total Assets	\$296,421,028	\$319,898,277	\$340,583,026
4	<u>Cash Flow to Total Debt Ratio</u>	9.7	31.3	37.7
5	Excess/(Deficiency) of Revenues Over Expenses	(\$7,527,961)	\$13,583,423	\$19,505,205
6	Depreciation Expense	\$16,814,826	\$17,335,024	\$17,534,609
7	Excess of Revenues Over Expenses and Depreciation Expense	\$9,286,865	\$30,918,447	\$37,039,814
8	Total Current Liabilities	\$28,614,838	\$33,811,045	\$33,555,637
9	Total Long Term Debt	\$67,121,518	\$64,995,680	\$64,591,831
10	Total Current Liabilities and Total Long Term Debt	\$95,736,356	\$98,806,725	\$98,147,468
11	<u>Long Term Debt to Capitalization Ratio</u>	31.6	36.1	28.7
12	Total Long Term Debt	\$67,121,518	\$64,995,680	\$64,591,831
13	Total Net Assets	\$145,101,601	\$115,085,725	\$160,830,713
14	Total Long Term Debt and Total Net Assets	\$212,223,119	\$180,081,405	\$225,422,544

WILLIAM W. BACKUS HOSPITAL						
TWELVE MONTHS ACTUAL FILING						
FISCAL YEAR 2010						
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT						
(1)	(2)	(3)	(4)	(5)	(6)	(7)
		PATIENT	STAFFED	AVAILABLE	OCCUPANCY	OCCUPANCY
LINE	DESCRIPTION	DAYS	BEDS (A)	BEDS	OF STAFFED	OF AVAILABLE
					BEDS (A)	BEDS
1	Adult Medical/Surgical	36,698	139	166	72.3%	60.6%
2	ICU/CCU (Excludes Neonatal ICU)	3,221	12	12	73.5%	73.5%
3	Psychiatric: Ages 0 to 17	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	4,960	18	20	75.5%	67.9%
	TOTAL PSYCHIATRIC	4,960	18	20	75.5%	67.9%
5	Rehabilitation	0	0	0	0.0%	0.0%
6	Maternity	2,244	15	15	41.0%	41.0%
7	Newborn	1,973	18	20	30.0%	27.0%
8	Neonatal ICU	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0.0%	0.0%
10	Other	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	47,123	184	213	70.2%	60.6%
	TOTAL INPATIENT BED UTILIZATION	49,096	202	233	66.6%	57.7%
	TOTAL INPATIENT REPORTED YEAR	49,096	202	233	66.6%	57.7%
	TOTAL INPATIENT PRIOR YEAR	50,032	202	233	67.9%	58.8%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-936	0	0	-1.3%	-1.1%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-2%	0%	0%	-2%	-2%
	Total Licensed Beds and Bassinets	233				
(A) This number may not exceed the number of available beds for each department or in total.						

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	8,673	7,598	-1,075	-12%
2	Outpatient Scans (Excluding Emergency Department Scans)	15,183	14,217	-966	-6%
3	Emergency Department Scans	12,972	11,534	-1,438	-11%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	36,828	33,349	-3,479	-9%
B. MRI Scans (A)					
1	Inpatient Scans	1,160	965	-195	-17%
2	Outpatient Scans (Excluding Emergency Department Scans)	8,517	8,969	452	5%
3	Emergency Department Scans	277	268	-9	-3%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	9,954	10,202	248	2%
C. PET Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D. PET/CT Scans (A)					
1	Inpatient Scans	10	11	1	10%
2	Outpatient Scans (Excluding Emergency Department Scans)	722	808	86	12%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	732	819	87	12%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	573	536	-37	-6%
2	Outpatient Procedures	10,000	10,620	620	6%
	Total Linear Accelerator Procedures	10,573	11,156	583	6%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	127	113	-14	-11%
2	Outpatient Procedures	260	209	-51	-20%
	Total Cardiac Catheterization Procedures	387	322	-65	-17%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
H. Electrophysiology Studies					
1	Inpatient Studies	37	47	10	27%
2	Outpatient Studies	15	29	14	93%
	Total Electrophysiology Studies	52	76	24	46%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	3,477	3,246	-231	-7%
2	Outpatient Surgical Procedures	7,217	7,453	236	3%
	Total Surgical Procedures	10,694	10,699	5	0%
J. Endoscopy Procedures					

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	657	489	-168	-26%
2	Outpatient Endoscopy Procedures	2,215	2,127	-88	-4%
	Total Endoscopy Procedures	2,872	2,616	-256	-9%
K.	Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	6,343	6,391	48	1%
2	Emergency Room Visits: Treated and Discharged	57,305	59,170	1,865	3%
	Total Emergency Room Visits	63,648	65,561	1,913	3%
L.	Hospital Clinic Visits				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	20,123	22,179	2,056	10%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	49,296	46,023	-3,273	-7%
	Total Hospital Clinic Visits	69,419	68,202	-1,217	-2%
M.	Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	10,563	13,032	2,469	23%
2	Cardiology	7,280	6,176	-1,104	-15%
3	Chemotherapy	1,363	2,214	851	62%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	202,203	195,522	-6,681	-3%
	Total Other Hospital Outpatient Visits	221,409	216,944	-4,465	-2%
N.	Hospital Full Time Equivalent Employees				
1	Total Nursing FTEs	462.2	450.8	-11.4	-2%
2	Total Physician FTEs	34.2	36.7	2.5	7%
3	Total Non-Nursing and Non-Physician FTEs	1,087.1	1,054.6	-32.5	-3%
	Total Hospital Full Time Equivalent Employees	1,583.5	1,542.1	-41.4	-3%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
A. Outpatient Surgical Procedures					
1	BACKUS HOSPITAL	7,217	7,453	236	3%
	Total Outpatient Surgical Procedures(A)	7,217	7,453	236	3%
B. Outpatient Endoscopy Procedures					
1	BACKUS HOSPITAL	2,215	2,127	-88	-4%
	Total Outpatient Endoscopy Procedures(B)	2,215	2,127	-88	-4%
C. Outpatient Hospital Emergency Room Visits					
1	BACKUS HOSPITAL	57,305	59,170	1,865	3%
	Total Outpatient Hospital Emergency Room Visits(C)	57,305	59,170	1,865	3%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$115,948,483	\$118,711,488	\$2,763,005	2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$46,477,332	\$50,024,630	\$3,547,298	8%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	40.08%	42.14%	2.06%	5%
4	DISCHARGES	5,039	5,229	190	4%
5	CASE MIX INDEX (CMI)	1.45900	1.41700	(0.04200)	-3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,351.90100	7,409.49300	57.59200	1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,321.81	\$6,751.42	\$429.61	7%
8	PATIENT DAYS	26,007	25,493	(514)	-2%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,787.11	\$1,962.29	\$175.18	10%
10	AVERAGE LENGTH OF STAY	5.2	4.9	(0.3)	-6%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$102,528,142	\$106,993,930	\$4,465,788	4%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$24,698,560	\$26,944,789	\$2,246,229	9%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.09%	25.18%	1.09%	5%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	88.43%	90.13%	1.70%	2%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,455.76599	4,712.86536	257.09937	6%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,543.06	\$5,717.28	\$174.23	3%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$218,476,625	\$225,705,418	\$7,228,793	3%
18	TOTAL ACCRUED PAYMENTS	\$71,175,892	\$76,969,419	\$5,793,527	8%
19	TOTAL ALLOWANCES	\$147,300,733	\$148,735,999	\$1,435,266	1%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$76,065,517	\$78,155,513	\$2,089,996	3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$56,138,442	\$57,243,662	\$1,105,220	2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	73.80%	73.24%	-0.56%	-1%
4	DISCHARGES	4,461	4,440	(21)	0%
5	CASE MIX INDEX (CMI)	1.31510	1.21600	(0.09910)	-8%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,866.66110	5,399.04000	(467.62110)	-8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$9,569.06	\$10,602.56	\$1,033.50	11%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,247.25)	(\$3,851.14)	(\$603.89)	19%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$19,050,517)	(\$20,792,453)	(\$1,741,936)	9%
10	PATIENT DAYS	15,280	14,787	(493)	-3%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,673.98	\$3,871.22	\$197.23	5%
12	AVERAGE LENGTH OF STAY	3.4	3.3	(0.1)	-3%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$175,770,855	\$178,390,153	\$2,619,298	1%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$94,581,155	\$98,609,680	\$4,028,525	4%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	53.81%	55.28%	1.47%	3%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	231.08%	228.25%	-2.83%	-1%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	10,308.40011	10,134.31105	(174.08906)	-2%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,175.15	\$9,730.28	\$555.13	6%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$3,632.10)	(\$4,013.00)	(\$380.90)	10%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$37,441,117)	(\$40,668,947)	(\$3,227,830)	9%
NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)					
21	TOTAL ACCRUED CHARGES	\$251,836,372	\$256,545,666	\$4,709,294	2%
22	TOTAL ACCRUED PAYMENTS	\$150,719,597	\$155,853,342	\$5,133,745	3%
23	TOTAL ALLOWANCES	\$101,116,775	\$100,692,324	(\$424,451)	0%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$56,491,633)	(\$61,461,400)	(\$4,969,767)	9%
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$217,279,782	\$224,385,117	\$7,105,335	3%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$145,881,679	\$150,780,057	\$4,898,378	3%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$71,398,103	\$73,605,060	\$2,206,957	3%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	32.86%	32.80%	-0.06%	

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
C.	<u>UNINSURED</u>				
	<u>UNINSURED INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$4,648,083	\$3,827,835	(\$820,248)	-18%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$839,769	\$928,196	\$88,427	11%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	18.07%	24.25%	6.18%	34%
4	DISCHARGES	265	176	(89)	-34%
5	CASE MIX INDEX (CMI)	1.18480	1.01190	(0.17290)	-15%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	313.97200	178.09440	(135.87760)	-43%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,674.66	\$5,211.82	\$2,537.16	95%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$6,894.40	\$5,390.74	(\$1,503.66)	-22%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$3,647.15	\$1,539.60	(\$2,107.55)	-58%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,145,103	\$274,195	(\$870,908)	-76%
11	PATIENT DAYS	1,101	878	(223)	-20%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$762.73	\$1,057.17	\$294.44	39%
13	AVERAGE LENGTH OF STAY	4.2	5.0	0.8	20%
	<u>UNINSURED OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$11,539,441	\$10,114,453	(\$1,424,988)	-12%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,437,935	\$2,171,511	(\$266,424)	-11%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.13%	21.47%	0.34%	2%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	248.26%	264.23%	15.97%	6%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	657.89528	465.05237	(192.84291)	-29%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,705.66	\$4,669.39	\$963.73	26%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$5,469.50	\$5,060.89	(\$408.61)	-7%
21	MEDICARE - UNINSURED OP PMT / OPED	\$1,837.40	\$1,047.89	(\$789.50)	-43%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,208,815	\$487,325	(\$721,490)	-60%
	<u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$16,187,524	\$13,942,288	(\$2,245,236)	-14%
24	TOTAL ACCRUED PAYMENTS	\$3,277,704	\$3,099,707	(\$177,997)	-5%
25	TOTAL ALLOWANCES	\$12,909,820	\$10,842,581	(\$2,067,239)	-16%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,353,918	\$761,520	(\$1,592,398)	-68%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$21,740,269	\$25,029,572	\$3,289,303	15%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$6,181,260	\$6,568,500	\$387,240	6%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	28.43%	26.24%	-2.19%	-8%
4	DISCHARGES	1,764	1,891	127	7%
5	CASE MIX INDEX (CMI)	0.89440	0.88620	(0.00820)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,577.72160	1,675.80420	98.08260	6%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,917.84	\$3,919.61	\$1.77	0%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$5,651.22	\$6,682.95	\$1,031.73	18%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,403.97	\$2,831.81	\$427.84	18%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,792,798	\$4,745,565	\$952,766	25%
11	PATIENT DAYS	6,270	6,660	390	6%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$985.85	\$986.26	\$0.41	0%
13	AVERAGE LENGTH OF STAY	3.6	3.5	(0.0)	-1%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$37,356,397	\$48,966,375	\$11,609,978	31%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$10,155,897	\$13,349,593	\$3,193,696	31%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.19%	27.26%	0.08%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	171.83%	195.63%	23.80%	14%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,031.08873	3,699.44061	668.35188	22%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,350.58	\$3,608.54	\$257.97	8%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$5,824.58	\$6,121.74	\$297.16	5%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,192.48	\$2,108.74	(\$83.74)	-4%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,645,597	\$7,801,159	\$1,155,562	17%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$59,096,666	\$73,995,947	\$14,899,281	25%
24	TOTAL ACCRUED PAYMENTS	\$16,337,157	\$19,918,093	\$3,580,936	22%
25	TOTAL ALLOWANCES	\$42,759,509	\$54,077,854	\$11,318,345	26%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,438,396	\$12,546,724	\$2,108,328	20%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
E. OTHER MEDICAL ASSISTANCE (O.M.A.)					
OTHER MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$9,448,063	\$8,170,373	(\$1,277,690)	-14%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,429,087	\$1,085,775	(\$343,312)	-24%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	15.13%	13.29%	-1.84%	-12%
4	DISCHARGES	384	398	14	4%
5	CASE MIX INDEX (CMI)	1.27210	1.16170	(0.11040)	-9%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	488.48640	462.35660	(26.12980)	-5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,925.54	\$2,348.35	(\$577.19)	-20%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$6,643.52	\$8,254.21	\$1,610.69	24%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$3,396.27	\$4,403.07	\$1,006.80	30%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,659,032	\$2,035,791	\$376,759	23%
11	PATIENT DAYS	1,826	1,607	(219)	-12%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$782.63	\$675.65	(\$106.98)	-14%
13	AVERAGE LENGTH OF STAY	4.8	4.0	(0.7)	-15%
OTHER MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$12,411,358	\$11,446,758	(\$964,600)	-8%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,273,170	\$1,679,893	(\$593,277)	-26%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.32%	14.68%	-3.64%	-20%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	131.36%	140.10%	8.74%	7%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	504.43794	557.60119	53.16324	11%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,506.34	\$3,012.71	(\$1,493.63)	-33%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$4,668.81	\$6,717.57	\$2,048.75	44%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$1,036.71	\$2,704.57	\$1,667.86	161%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$522,958	\$1,508,071	\$985,114	188%
OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$21,859,421	\$19,617,131	(\$2,242,290)	-10%
24	TOTAL ACCRUED PAYMENTS	\$3,702,257	\$2,765,668	(\$936,589)	-25%
25	TOTAL ALLOWANCES	\$18,157,164	\$16,851,463	(\$1,305,701)	-7%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$2,181,990	\$3,543,862	\$1,361,872	62%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$31,188,332	\$33,199,945	\$2,011,613	6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$7,610,347	\$7,654,275	\$43,928	1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	24.40%	23.06%	-1.35%	-6%
4	DISCHARGES	2,148	2,289	141	7%
5	CASE MIX INDEX (CMI)	0.96192	0.93410	(0.02782)	-3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,066.20800	2,138.16080	71.95280	3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,683.24	\$3,579.84	(\$103.40)	-3%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,885.82	\$7,022.72	\$1,136.90	19%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,638.57	\$3,171.58	\$533.02	20%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,451,830	\$6,781,355	\$1,329,525	24%
11	PATIENT DAYS	8,096	8,267	171	2%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$940.01	\$925.88	(\$14.13)	-2%
13	AVERAGE LENGTH OF STAY	3.8	3.6	(0.2)	-4%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$49,767,755	\$60,413,133	\$10,645,378	21%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$12,429,067	\$15,029,486	\$2,600,419	21%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.97%	24.88%	-0.10%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	159.57%	181.97%	22.40%	14%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,535.52667	4,257.04180	721.51513	20%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,515.48	\$3,530.50	\$15.02	0%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,659.68	\$6,199.78	\$540.10	10%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,027.58	\$2,186.78	\$159.21	8%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,168,555	\$9,309,230	\$2,140,675	30%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$80,956,087	\$93,613,078	\$12,656,991	16%
24	TOTAL ACCRUED PAYMENTS	\$20,039,414	\$22,683,761	\$2,644,347	13%
25	TOTAL ALLOWANCES	\$60,916,673	\$70,929,317	\$10,012,644	16%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$2,651,102	\$2,330,732	(\$320,370)	-12%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,174,297	\$909,649	(\$264,648)	-23%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	44.29%	39.03%	-5.27%	-12%
4	DISCHARGES	237	217	(20)	-8%
5	CASE MIX INDEX (CMI)	0.94080	0.78740	(0.15340)	-16%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	222.96960	170.86580	(52.10380)	-23%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,266.62	\$5,323.76	\$57.14	1%
8	PATIENT DAYS	649	549	(100)	-15%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,809.39	\$1,656.92	(\$152.47)	-8%
10	AVERAGE LENGTH OF STAY	2.7	2.5	(0.2)	-8%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$6,720,868	\$7,195,831	\$474,963	7%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,520,995	\$2,206,442	(\$314,553)	-12%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$9,371,970	\$9,526,563	\$154,593	2%
14	TOTAL ACCRUED PAYMENTS	\$3,695,292	\$3,116,091	(\$579,201)	-16%
15	TOTAL ALLOWANCES	\$5,676,678	\$6,410,472	\$733,794	13%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$3,773,294	\$4,374,927	\$601,633	16%
2	TOTAL OPERATING EXPENSES	\$250,646,571	\$262,102,283	\$11,455,712	5%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$2,039,977	\$2,166,356	\$126,379	6%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$6,641,717	\$6,321,367	(\$320,350)	-5%
5	BAD DEBTS (CHARGES)	\$17,093,520	\$14,508,284	(\$2,585,236)	-15%
6	UNCOMPENSATED CARE (CHARGES)	\$23,735,237	\$20,829,651	(\$2,905,586)	-12%
7	COST OF UNCOMPENSATED CARE	\$10,485,337	\$9,279,517	(\$1,205,820)	-12%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$80,956,087	\$93,613,078	\$12,656,991	16%
9	TOTAL ACCRUED PAYMENTS	\$20,039,414	\$22,683,761	\$2,644,347	13%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$35,763,360	\$41,704,211	\$5,940,851	17%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$15,723,946	\$19,020,450	\$3,296,504	21%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$225,853,434	\$232,397,678	\$6,544,244	3%
2	TOTAL INPATIENT PAYMENTS	\$111,400,418	\$115,832,216	\$4,431,798	4%
3	TOTAL INPATIENT PAYMENTS / CHARGES	49.32%	49.84%	0.52%	1%
4	TOTAL DISCHARGES	11,885	12,175	290	2%
5	TOTAL CASE MIX INDEX	1.30482	1.24169	(0.06313)	-5%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	15,507,73970	15,117,55960	(390,18010)	-3%
7	TOTAL OUTPATIENT CHARGES	\$334,787,620	\$352,993,047	\$18,205,427	5%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	148.23%	151.89%	3.66%	2%
9	TOTAL OUTPATIENT PAYMENTS	\$134,229,777	\$142,790,397	\$8,560,620	6%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	40.09%	40.45%	0.36%	1%
11	TOTAL CHARGES	\$560,641,054	\$585,390,725	\$24,749,671	4%
12	TOTAL PAYMENTS	\$245,630,195	\$258,622,613	\$12,992,418	5%
13	TOTAL PAYMENTS / TOTAL CHARGES	43.81%	44.18%	0.37%	1%
14	PATIENT DAYS	50,032	49,096	(936)	-2%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$149,787,917	\$154,242,165	\$4,454,248	3%
2	INPATIENT PAYMENTS	\$55,261,976	\$58,588,554	\$3,326,578	6%
3	GOVT. INPATIENT PAYMENTS / CHARGES	36.89%	37.98%	1.09%	3%
4	DISCHARGES	7,424	7,735	311	4%
5	CASE MIX INDEX	1.29864	1.25643	(0.04220)	-3%
6	CASE MIX ADJUSTED DISCHARGES	9,641.07860	9,718.51960	77.44100	1%
7	OUTPATIENT CHARGES	\$159,016,765	\$174,602,894	\$15,586,129	10%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	106.16%	113.20%	7.04%	7%
9	OUTPATIENT PAYMENTS	\$39,648,622	\$44,180,717	\$4,532,095	11%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.93%	25.30%	0.37%	1%
11	TOTAL CHARGES	\$308,804,682	\$328,845,059	\$20,040,377	6%
12	TOTAL PAYMENTS	\$94,910,598	\$102,769,271	\$7,858,673	8%
13	TOTAL PAYMENTS / CHARGES	30.73%	31.25%	0.52%	2%
14	PATIENT DAYS	34,752	34,309	(443)	-1%
15	TOTAL GOVERNMENT DEDUCTIONS	\$213,894,084	\$226,075,788	\$12,181,704	6%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	5.2	4.9	(0.3)	-6%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.4	3.3	(0.1)	-3%
3	UNINSURED	4.2	5.0	0.8	20%
4	MEDICAID	3.6	3.5	(0.0)	-1%
5	OTHER MEDICAL ASSISTANCE	4.8	4.0	(0.7)	-15%
6	CHAMPUS / TRICARE	2.7	2.5	(0.2)	-8%
7	TOTAL AVERAGE LENGTH OF STAY	4.2	4.0	(0.2)	-4%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$560,641,054	\$585,390,725	\$24,749,671	4%
2	TOTAL GOVERNMENT DEDUCTIONS	\$213,894,084	\$226,075,788	\$12,181,704	6%
3	UNCOMPENSATED CARE	\$23,735,237	\$20,829,651	(\$2,905,586)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$71,398,103	\$73,605,060	\$2,206,957	3%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,983,436	\$6,257,612	\$274,176	5%
6	TOTAL ADJUSTMENTS	\$315,010,860	\$326,768,111	\$11,757,251	4%
7	TOTAL ACCRUED PAYMENTS	\$245,630,194	\$258,622,614	\$12,992,420	5%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$2,039,977	\$2,166,356	\$126,379	6%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMTS.	\$247,670,171	\$260,788,970	\$13,118,799	5%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4417624597	0.4454955620	0.0037331023	1%
11	COST OF UNCOMPENSATED CARE	\$10,485,337	\$9,279,517	(\$1,205,820)	-12%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$15,723,946	\$19,020,450	\$3,296,504	21%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$26,209,283	\$28,299,967	\$2,090,684	8%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$6,645,597	\$7,801,159	\$1,155,562	17%
2	OTHER MEDICAL ASSISTANCE	\$2,181,990	\$3,543,862	\$1,361,872	62%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,353,918	\$761,520	(\$1,592,398)	-68%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$11,181,505	\$12,106,541	\$925,036	8%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$10,821,353	\$11,330,897	\$509,544	4.71%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$11,982,099	\$9,259,746	(\$2,722,353)	-22.72%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$259,652,271	\$270,048,715	\$10,396,444	4.00%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$560,641,054	\$585,390,725	\$24,749,671	4.41%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$78,485	\$76,847	(\$1,638)	-2.09%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$23,813,722	\$20,906,498	(\$2,907,224)	-12.21%

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$76,065,517	\$78,155,513	\$2,089,996
2	MEDICARE	\$115,948,483	118,711,488	\$2,763,005
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$31,188,332	33,199,945	\$2,011,613
4	MEDICAID	\$21,740,269	25,029,572	\$3,289,303
5	OTHER MEDICAL ASSISTANCE	\$9,448,063	8,170,373	(\$1,277,690)
6	CHAMPUS / TRICARE	\$2,651,102	2,330,732	(\$320,370)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,648,083	3,827,835	(\$820,248)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$149,787,917	\$154,242,165	\$4,454,248
	TOTAL INPATIENT CHARGES	\$225,853,434	\$232,397,678	\$6,544,244
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$175,770,855	\$178,390,153	\$2,619,298
2	MEDICARE	\$102,528,142	106,993,930	\$4,465,788
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$49,767,755	60,413,133	\$10,645,378
4	MEDICAID	\$37,356,397	48,966,375	\$11,609,978
5	OTHER MEDICAL ASSISTANCE	\$12,411,358	11,446,758	(\$964,600)
6	CHAMPUS / TRICARE	\$6,720,868	7,195,831	\$474,963
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$11,539,441	10,114,453	(\$1,424,988)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$159,016,765	\$174,602,894	\$15,586,129
	TOTAL OUTPATIENT CHARGES	\$334,787,620	\$352,993,047	\$18,205,427
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$251,836,372	\$256,545,666	\$4,709,294
2	TOTAL MEDICARE	\$218,476,625	\$225,705,418	\$7,228,793
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$80,956,087	\$93,613,078	\$12,656,991
4	TOTAL MEDICAID	\$59,096,666	\$73,995,947	\$14,899,281
5	TOTAL OTHER MEDICAL ASSISTANCE	\$21,859,421	\$19,617,131	(\$2,242,290)
6	TOTAL CHAMPUS / TRICARE	\$9,371,970	\$9,526,563	\$154,593
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$16,187,524	\$13,942,288	(\$2,245,236)
	TOTAL GOVERNMENT CHARGES	\$308,804,682	\$328,845,059	\$20,040,377
	TOTAL CHARGES	\$560,641,054	\$585,390,725	\$24,749,671
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$56,138,442	\$57,243,662	\$1,105,220
2	MEDICARE	\$46,477,332	50,024,630	\$3,547,298
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,610,347	7,654,275	\$43,928
4	MEDICAID	\$6,181,260	6,568,500	\$387,240
5	OTHER MEDICAL ASSISTANCE	\$1,429,087	1,085,775	(\$343,312)
6	CHAMPUS / TRICARE	\$1,174,297	909,649	(\$264,648)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$839,769	928,196	\$88,427
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$55,261,976	\$58,588,554	\$3,326,578
	TOTAL INPATIENT PAYMENTS	\$111,400,418	\$115,832,216	\$4,431,798
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$94,581,155	\$98,609,680	\$4,028,525
2	MEDICARE	\$24,698,560	26,944,789	\$2,246,229
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$12,429,067	15,029,486	\$2,600,419
4	MEDICAID	\$10,155,897	13,349,593	\$3,193,696
5	OTHER MEDICAL ASSISTANCE	\$2,273,170	1,679,893	(\$593,277)
6	CHAMPUS / TRICARE	\$2,520,995	2,206,442	(\$314,553)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,437,935	2,171,511	(\$266,424)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$39,648,622	\$44,180,717	\$4,532,095
	TOTAL OUTPATIENT PAYMENTS	\$134,229,777	\$142,790,397	\$8,560,620
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$150,719,597	\$155,853,342	\$5,133,745
2	TOTAL MEDICARE	\$71,175,892	\$76,969,419	\$5,793,527
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$20,039,414	\$22,683,761	\$2,644,347
4	TOTAL MEDICAID	\$16,337,157	\$19,918,093	\$3,580,936
5	TOTAL OTHER MEDICAL ASSISTANCE	\$3,702,257	\$2,765,668	(\$936,589)
6	TOTAL CHAMPUS / TRICARE	\$3,695,292	\$3,116,091	(\$579,201)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,277,704	\$3,099,707	(\$177,997)
	TOTAL GOVERNMENT PAYMENTS	\$94,910,598	\$102,769,271	\$7,858,673
	TOTAL PAYMENTS	\$245,630,195	\$258,622,613	\$12,992,418

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	13.57%	13.35%	-0.22%
2	MEDICARE	20.68%	20.28%	-0.40%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.56%	5.67%	0.11%
4	MEDICAID	3.88%	4.28%	0.40%
5	OTHER MEDICAL ASSISTANCE	1.69%	1.40%	-0.29%
6	CHAMPUS / TRICARE	0.47%	0.40%	-0.07%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.83%	0.65%	-0.18%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	26.72%	26.35%	-0.37%
	TOTAL INPATIENT PAYER MIX	40.28%	39.70%	-0.59%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	31.35%	30.47%	-0.88%
2	MEDICARE	18.29%	18.28%	-0.01%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.88%	10.32%	1.44%
4	MEDICAID	6.66%	8.36%	1.70%
5	OTHER MEDICAL ASSISTANCE	2.21%	1.96%	-0.26%
6	CHAMPUS / TRICARE	1.20%	1.23%	0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.06%	1.73%	-0.33%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	28.36%	29.83%	1.46%
	TOTAL OUTPATIENT PAYER MIX	59.72%	60.30%	0.59%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	22.85%	22.13%	-0.72%
2	MEDICARE	18.92%	19.34%	0.42%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.10%	2.96%	-0.14%
4	MEDICAID	2.52%	2.54%	0.02%
5	OTHER MEDICAL ASSISTANCE	0.58%	0.42%	-0.16%
6	CHAMPUS / TRICARE	0.48%	0.35%	-0.13%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.34%	0.36%	0.02%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	22.50%	22.65%	0.16%
	TOTAL INPATIENT PAYER MIX	45.35%	44.79%	-0.56%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	38.51%	38.13%	-0.38%
2	MEDICARE	10.06%	10.42%	0.36%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.06%	5.81%	0.75%
4	MEDICAID	4.13%	5.16%	1.03%
5	OTHER MEDICAL ASSISTANCE	0.93%	0.65%	-0.28%
6	CHAMPUS / TRICARE	1.03%	0.85%	-0.17%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.99%	0.84%	-0.15%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	16.14%	17.08%	0.94%
	TOTAL OUTPATIENT PAYER MIX	54.65%	55.21%	0.56%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,461	4,440	(21)
2	MEDICARE	5,039	5,229	190
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,148	2,289	141
4	MEDICAID	1,764	1,891	127
5	OTHER MEDICAL ASSISTANCE	384	398	14
6	CHAMPUS / TRICARE	237	217	(20)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	265	176	(89)
	TOTAL GOVERNMENT DISCHARGES	7,424	7,735	311
	TOTAL DISCHARGES	11,885	12,175	290
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15,280	14,787	(493)
2	MEDICARE	26,007	25,493	(514)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,096	8,267	171
4	MEDICAID	6,270	6,660	390
5	OTHER MEDICAL ASSISTANCE	1,826	1,607	(219)
6	CHAMPUS / TRICARE	649	549	(100)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,101	878	(223)
	TOTAL GOVERNMENT PATIENT DAYS	34,752	34,309	(443)
	TOTAL PATIENT DAYS	50,032	49,096	(936)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.4	3.3	(0.1)
2	MEDICARE	5.2	4.9	(0.3)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.8	3.6	(0.2)
4	MEDICAID	3.6	3.5	(0.0)
5	OTHER MEDICAL ASSISTANCE	4.8	4.0	(0.7)
6	CHAMPUS / TRICARE	2.7	2.5	(0.2)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.2	5.0	0.8
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.7	4.4	(0.2)
	TOTAL AVERAGE LENGTH OF STAY	4.2	4.0	(0.2)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.31510	1.21600	(0.09910)
2	MEDICARE	1.45900	1.41700	(0.04200)
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.96192	0.93410	(0.02782)
4	MEDICAID	0.89440	0.88620	(0.00820)
5	OTHER MEDICAL ASSISTANCE	1.27210	1.16170	(0.11040)
6	CHAMPUS / TRICARE	0.94080	0.78740	(0.15340)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.18480	1.01190	(0.17290)
	TOTAL GOVERNMENT CASE MIX INDEX	1.29864	1.25643	(0.04220)
	TOTAL CASE MIX INDEX	1.30482	1.24169	(0.06313)
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$217,279,782	\$224,385,117	\$7,105,335
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$145,881,679	\$150,780,057	\$4,898,378
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$71,398,103	\$73,605,060	\$2,206,957
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	32.86%	32.80%	-0.06%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$10,821,353	\$11,330,897	\$509,544
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,983,436	\$6,257,612	\$274,176
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$2,039,977	\$2,166,356	\$126,379
8	CHARITY CARE	\$6,641,717	\$6,321,367	(\$320,350)
9	BAD DEBTS	\$17,093,520	\$14,508,284	(\$2,585,236)
10	TOTAL UNCOMPENSATED CARE	\$23,735,237	\$20,829,651	(\$2,905,586)
11	TOTAL OTHER OPERATING REVENUE	\$217,279,782	\$224,385,117	\$7,105,335
12	TOTAL OPERATING EXPENSES	\$250,646,571	\$262,102,283	\$11,455,712

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,866.66110	5,399.04000	(467.62110)
2	MEDICARE	7,351.90100	7,409.49300	57.59200
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,066.20800	2,138.16080	71.95280
4	MEDICAID	1,577.72160	1,675.80420	98.08260
5	OTHER MEDICAL ASSISTANCE	488.48640	462.35660	(26.12980)
6	CHAMPUS / TRICARE	222.96960	170.86580	(52.10380)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	313.97200	178.09440	(135.87760)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	9,641.07860	9,718.51960	77.44100
	TOTAL CASE MIX ADJUSTED DISCHARGES	15,507.73970	15,117.55960	(390.18010)
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10,308.40011	10,134.31105	-174.08906
2	MEDICARE	4,455.76599	4,712.86536	257.09937
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,535.52667	4,257.04180	721.51513
4	MEDICAID	3,031.08873	3,699.44061	668.35188
5	OTHER MEDICAL ASSISTANCE	504.43794	557.60119	53.16324
6	CHAMPUS / TRICARE	600.82400	669.95919	69.13519
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	657.89528	465.05237	-192.84291
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	8,592.11667	9,639.86635	1,047.74968
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	18,900.51678	19,774.17741	873.66062
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,569.06	\$10,602.56	\$1,033.50
2	MEDICARE	\$6,321.81	\$6,751.42	\$429.61
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,683.24	\$3,579.84	(\$103.40)
4	MEDICAID	\$3,917.84	\$3,919.61	\$1.77
5	OTHER MEDICAL ASSISTANCE	\$2,925.54	\$2,348.35	(\$577.19)
6	CHAMPUS / TRICARE	\$5,266.62	\$5,323.76	\$57.14
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,674.66	\$5,211.82	\$2,537.16
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$5,731.93	\$6,028.55	\$296.62
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,183.54	\$7,662.10	\$478.56
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,175.15	\$9,730.28	\$555.13
2	MEDICARE	\$5,543.06	\$5,717.28	\$174.23
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,515.48	\$3,530.50	\$15.02
4	MEDICAID	\$3,350.58	\$3,608.54	\$257.97
5	OTHER MEDICAL ASSISTANCE	\$4,506.34	\$3,012.71	(\$1,493.63)
6	CHAMPUS / TRICARE	\$4,195.90	\$3,293.40	(\$902.50)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,705.66	\$4,669.39	\$963.73
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$4,614.53	\$4,583.13	(\$31.41)
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$7,101.91	\$7,221.05	\$119.14

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE DESCRIPTION		ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$6,645,597	\$7,801,159	\$1,155,562
2	OTHER MEDICAL ASSISTANCE	\$2,181,990	\$3,543,862	\$1,361,872
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,353,918	\$761,520	(\$1,592,398)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$11,181,505	\$12,106,541	\$925,036
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$560,641,054	\$585,390,725	\$24,749,671
2	TOTAL GOVERNMENT DEDUCTIONS	\$213,894,084	\$226,075,788	\$12,181,704
3	UNCOMPENSATED CARE	\$23,735,237	\$20,829,651	(\$2,905,586)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$71,398,103	\$73,605,060	\$2,206,957
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,983,436	\$6,257,612	\$274,176
6	TOTAL ADJUSTMENTS	\$315,010,860	\$326,768,111	\$11,757,251
7	TOTAL ACCRUED PAYMENTS	\$245,630,194	\$258,622,614	\$12,992,420
8	UCP DSH PAYMENTS (OHCA INPUT)	\$2,039,977	\$2,166,356	\$126,379
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$247,670,171	\$260,788,970	\$13,118,799
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4417624597	0.4454955620	0.0037331023
11	COST OF UNCOMPENSATED CARE	\$10,485,337	\$9,279,517	(\$1,205,820)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$15,723,946	\$19,020,450	\$3,296,504
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$26,209,283	\$28,299,967	\$2,090,684
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	73.80%	73.24%	-0.56%
2	MEDICARE	40.08%	42.14%	2.06%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	24.40%	23.06%	-1.35%
4	MEDICAID	28.43%	26.24%	-2.19%
5	OTHER MEDICAL ASSISTANCE	15.13%	13.29%	-1.84%
6	CHAMPUS / TRICARE	44.29%	39.03%	-5.27%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	18.07%	24.25%	6.18%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	36.89%	37.98%	1.09%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	49.32%	49.84%	0.52%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	53.81%	55.28%	1.47%
2	MEDICARE	24.09%	25.18%	1.09%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	24.97%	24.88%	-0.10%
4	MEDICAID	27.19%	27.26%	0.08%
5	OTHER MEDICAL ASSISTANCE	18.32%	14.68%	-3.64%
6	CHAMPUS / TRICARE	37.51%	30.66%	-6.85%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	21.13%	21.47%	0.34%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	24.93%	25.30%	0.37%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	40.09%	40.45%	0.36%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$245,630,195	\$258,622,613	\$12,992,418
	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.)			
2	(OHCA INPUT)	\$2,039,977	\$2,166,356	\$126,379
	OHCA DEFINED NET REVENUE	\$247,670,172	\$260,788,969	\$13,118,797
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$11,982,099	\$9,259,746	(\$2,722,353)
4	CALCULATED NET REVENUE	\$259,652,271	\$270,048,715	\$10,396,444
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$259,652,271	\$270,048,715	\$10,396,444
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$560,641,054	\$585,390,725	\$24,749,671
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$560,641,054	\$585,390,725	\$24,749,671
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$560,641,054	\$585,390,725	\$24,749,671
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$23,735,237	\$20,829,651	(\$2,905,586)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$78,485	\$76,847	(\$1,638)
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$23,813,722	\$20,906,498	(\$2,907,224)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$23,813,722	\$20,906,498	(\$2,907,224)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2010
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$78,155,513
2	MEDICARE	118,711,488
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	33,199,945
4	MEDICAID	25,029,572
5	OTHER MEDICAL ASSISTANCE	8,170,373
6	CHAMPUS / TRICARE	2,330,732
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,827,835
	TOTAL INPATIENT GOVERNMENT CHARGES	\$154,242,165
	TOTAL INPATIENT CHARGES	\$232,397,678
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$178,390,153
2	MEDICARE	106,993,930
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	60,413,133
4	MEDICAID	48,966,375
5	OTHER MEDICAL ASSISTANCE	11,446,758
6	CHAMPUS / TRICARE	7,195,831
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	10,114,453
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$174,602,894
	TOTAL OUTPATIENT CHARGES	\$352,993,047
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$256,545,666
2	TOTAL GOVERNMENT ACCRUED CHARGES	328,845,059
	TOTAL ACCRUED CHARGES	\$585,390,725
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$57,243,662
2	MEDICARE	50,024,630
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7,654,275
4	MEDICAID	6,568,500
5	OTHER MEDICAL ASSISTANCE	1,085,775
6	CHAMPUS / TRICARE	909,649
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	928,196
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$58,588,554
	TOTAL INPATIENT PAYMENTS	\$115,832,216
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$98,609,680
2	MEDICARE	26,944,789
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	15,029,486
4	MEDICAID	13,349,593
5	OTHER MEDICAL ASSISTANCE	1,679,893
6	CHAMPUS / TRICARE	2,206,442
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,171,511
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$44,180,717
	TOTAL OUTPATIENT PAYMENTS	\$142,790,397
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$155,853,342
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	102,769,271
	TOTAL ACCRUED PAYMENTS	\$258,622,613

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2010
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,440
2	MEDICARE	5,229
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,289
4	MEDICAID	1,891
5	OTHER MEDICAL ASSISTANCE	398
6	CHAMPUS / TRICARE	217
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	176
	TOTAL GOVERNMENT DISCHARGES	7,735
	TOTAL DISCHARGES	12,175
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.21600
2	MEDICARE	1.41700
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.93410
4	MEDICAID	0.88620
5	OTHER MEDICAL ASSISTANCE	1.16170
6	CHAMPUS / TRICARE	0.78740
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.01190
	TOTAL GOVERNMENT CASE MIX INDEX	1.25643
	TOTAL CASE MIX INDEX	1.24169
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$224,385,117
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$150,780,057
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$73,605,060
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	32.80%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$11,330,897
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$6,257,612
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$2,166,356
8	CHARITY CARE	\$6,321,367
9	BAD DEBTS	\$14,508,284
10	TOTAL UNCOMPENSATED CARE	\$20,829,651
11	TOTAL OTHER OPERATING REVENUE	\$4,374,927
12	TOTAL OPERATING EXPENSES	\$262,102,283

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2010
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$258,622,613
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$2,166,356
	OHCA DEFINED NET REVENUE	\$260,788,969
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$9,259,746
	CALCULATED NET REVENUE	\$270,048,715
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$270,048,715
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$585,390,725
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$585,390,725
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$585,390,725
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$20,829,651
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$76,847
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$20,906,498
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$20,906,498
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
A. Hospital Charity Care (from HRS Report 500)					
1	Number of Applicants	2,339	2,135	(204)	-9%
2	Number of Approved Applicants	2,198	2,081	(117)	-5%
3	Total Charges (A)	\$6,641,717	\$6,321,367	(\$320,350)	-5%
4	Average Charges	\$3,022	\$3,038	\$16	1%
5	Ratio of Cost to Charges (RCC)	0.438858	0.444083	0.005225	1%
6	Total Cost	\$2,914,771	\$2,807,212	(\$107,559)	-4%
7	Average Cost	\$1,326	\$1,349	\$23	2%
8	Charity Care - Inpatient Charges	\$2,291,821	\$2,384,599	\$92,778	4%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	2,461,682	2,272,551	(189,131)	-8%
10	Charity Care - Emergency Department Charges	1,888,214	1,664,217	(223,997)	-12%
11	Total Charges (A)	\$6,641,717	\$6,321,367	(\$320,350)	-5%
12	Charity Care - Number of Patient Days	3,013	2,461	(552)	-18%
13	Charity Care - Number of Discharges	597	564	(33)	-6%
14	Charity Care - Number of Outpatient ED Visits	2,617	2,161	(456)	-17%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	6,700	6,294	(406)	-6%
B. Hospital Bad Debts (from HRS Report 500)					
1	Bad Debts - Inpatient Services	\$3,125,269	\$2,910,189	(\$215,080)	-7%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	3,916,622	3,124,457	(792,165)	-20%
3	Bad Debts - Emergency Department	10,051,629	8,473,638	(1,577,991)	-16%
4	Total Bad Debts (A)	\$17,093,520	\$14,508,284	(\$2,585,236)	-15%
C. Hospital Uncompensated Care (from HRS Report 500)					
1	Charity Care (A)	\$6,641,717	\$6,321,367	(\$320,350)	-5%
2	Bad Debts (A)	17,093,520	14,508,284	(2,585,236)	-15%
3	Total Uncompensated Care (A)	\$23,735,237	\$20,829,651	(\$2,905,586)	-12%
4	Uncompensated Care - Inpatient Services	\$5,417,090	\$5,294,788	(\$122,302)	-2%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	6,378,304	5,397,008	(981,296)	-15%
6	Uncompensated Care - Emergency Department	11,939,843	10,137,855	(1,801,988)	-15%
7	Total Uncompensated Care (A)	\$23,735,237	\$20,829,651	(\$2,905,586)	-12%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3) FY 2009 ACTUAL TOTAL NON-GOVERNMENT	(4) FY 2010 ACTUAL TOTAL NON-GOVERNMENT	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<u>LINE</u>	<u>DESCRIPTION</u>				
	<u>COMMERCIAL - ALL PAYERS</u>				
1	Total Gross Revenue	\$217,279,782	\$224,385,117	\$7,105,335	3%
2	Total Contractual Allowances	\$71,398,103	\$73,605,060	\$2,206,957	3%
	Total Accrued Payments (A)	\$145,881,679	\$150,780,057	\$4,898,378	3%
	Total Discount Percentage	32.86%	32.80%	-0.06%	0%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	ACTUAL FY 2010
A. <u>Gross and Net Revenue</u>				
1	Inpatient Gross Revenue	\$215,985,577	\$225,853,434	\$232,397,678
2	Outpatient Gross Revenue	\$296,328,781	\$334,787,620	\$352,993,047
3	Total Gross Patient Revenue	\$512,314,358	\$560,641,054	\$585,390,725
4	Net Patient Revenue	\$242,131,827	\$259,652,271	\$270,048,715
B. <u>Total Operating Expenses</u>				
1	Total Operating Expense	\$237,933,157	\$250,646,571	\$262,102,283
C. <u>Utilization Statistics</u>				
1	Patient Days	50,512	50,032	49,096
2	Discharges	11,940	11,885	12,175
3	Average Length of Stay	4.2	4.2	4.0
4	Equivalent (Adjusted) Patient Days (EPD)	119,814	124,196	123,669
0	Equivalent (Adjusted) Discharges (ED)	28,321	29,502	30,668
D. <u>Case Mix Statistics</u>				
1	Case Mix Index	1.32503	1.30482	1.24169
2	Case Mix Adjusted Patient Days (CMAPD)	66,930	65,283	60,962
3	Case Mix Adjusted Discharges (CMAD)	15,821	15,508	15,118
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	158,757	162,052	153,558
5	Case Mix Adjusted Equivalent Discharges (CMAED)	37,527	38,495	38,080
E. <u>Gross Revenue Per Statistic</u>				
1	Total Gross Revenue per Patient Day	\$10,142	\$11,206	\$11,923
2	Total Gross Revenue per Discharge	\$42,907	\$47,172	\$48,081
3	Total Gross Revenue per EPD	\$4,276	\$4,514	\$4,734
4	Total Gross Revenue per ED	\$18,089	\$19,003	\$19,088
5	Total Gross Revenue per CMAEPD	\$3,227	\$3,460	\$3,812
6	Total Gross Revenue per CMAED	\$13,652	\$14,564	\$15,373
7	Inpatient Gross Revenue per EPD	\$1,803	\$1,819	\$1,879
8	Inpatient Gross Revenue per ED	\$7,626	\$7,655	\$7,578

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	ACTUAL FY 2010
F. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$4,794	\$5,190	\$5,500
2	Net Patient Revenue per Discharge	\$20,279	\$21,847	\$22,181
3	Net Patient Revenue per EPD	\$2,021	\$2,091	\$2,184
4	Net Patient Revenue per ED	\$8,549	\$8,801	\$8,806
5	Net Patient Revenue per CMAEPD	\$1,525	\$1,602	\$1,759
6	Net Patient Revenue per CMAED	\$6,452	\$6,745	\$7,092
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$4,710	\$5,010	\$5,339
2	Total Operating Expense per Discharge	\$19,927	\$21,089	\$21,528
3	Total Operating Expense per EPD	\$1,986	\$2,018	\$2,119
4	Total Operating Expense per ED	\$8,401	\$8,496	\$8,546
5	Total Operating Expense per CMAEPD	\$1,499	\$1,547	\$1,707
6	Total Operating Expense per CMAED	\$6,340	\$6,511	\$6,883
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$38,205,041	\$39,916,076	\$40,612,798
2	Nursing Fringe Benefits Expense	\$7,115,330	\$7,644,307	\$7,936,981
3	Total Nursing Salary and Fringe Benefits Expense	\$45,320,371	\$47,560,383	\$48,549,779
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$9,040,475	\$9,282,412	\$11,850,977
2	Physician Fringe Benefits Expense	\$1,767,737	\$1,600,541	\$1,934,151
3	Total Physician Salary and Fringe Benefits Expense	\$10,808,212	\$10,882,953	\$13,785,128
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$52,710,981	\$60,399,069	\$54,917,330
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$14,812,729	\$18,181,054	\$17,310,311
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$67,523,710	\$78,580,123	\$72,227,641
K. Total Salary and Fringe Benefits Expense				
1	Total Salary Expense	\$99,956,497	\$109,597,557	\$107,381,105
2	Total Fringe Benefits Expense	\$23,695,796	\$27,425,902	\$27,181,443
3	Total Salary and Fringe Benefits Expense	\$123,652,293	\$137,023,459	\$134,562,548

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	ACTUAL FY 2010
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	474.3	462.2	450.8
2	Total Physician FTEs	41.5	34.2	36.7
3	Total Non-Nursing, Non-Physician FTEs	987.4	1087.1	1054.6
4	Total Full Time Equivalent Employees (FTEs)	1,503.2	1,583.5	1,542.1
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$80,550	\$86,361	\$90,091
2	Nursing Fringe Benefits Expense per FTE	\$15,002	\$16,539	\$17,606
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$95,552	\$102,900	\$107,697
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$217,843	\$271,416	\$322,915
2	Physician Fringe Benefits Expense per FTE	\$42,596	\$46,799	\$52,702
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$260,439	\$318,215	\$375,617
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$53,384	\$55,560	\$52,074
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$15,002	\$16,724	\$16,414
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$68,385	\$72,284	\$68,488
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$66,496	\$69,212	\$69,633
2	Total Fringe Benefits Expense per FTE	\$15,764	\$17,320	\$17,626
3	Total Salary and Fringe Benefits Expense per FTE	\$82,259	\$86,532	\$87,259
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,448	\$2,739	\$2,741
2	Total Salary and Fringe Benefits Expense per Discharge	\$10,356	\$11,529	\$11,052
3	Total Salary and Fringe Benefits Expense per EPD	\$1,032	\$1,103	\$1,088
4	Total Salary and Fringe Benefits Expense per ED	\$4,366	\$4,644	\$4,388
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$779	\$846	\$876
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,295	\$3,559	\$3,534